

Client Questionnaire For Non-Business Debtor

Section 1 - Basic Information

Part A. Name and Address

Name: _____
Last First Middle

Telephone Number
Home: _____ Work: _____ Cell: _____

Have you used any other names in the past eight years? No Yes *If Yes, list other names (includes d/b/a if in business):* _____

Social Security Number: _____ - _____ - _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Have you lived at this address for at least 180 days? No Yes

If you have a different mailing address, please list:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Part B. Name and Address of Spouse

If you are filing jointly with your spouse, fill in the following information about your spouse:

Name: _____
Last First Middle

Has your spouse used any other names in the past eight years? No Yes

If Yes, list other names, includes d/b/a if in business: _____

Social Security Number: _____ - _____ - _____ Email: _____

Address *(if different from your address)*: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

If your spouse has a different mailing address, please list: Same as spouse or different, list: _____

Emergency Contact For Both: Name: _____ Relation: _____

Address: _____ Phone: _____ Email: _____

Part C. Prior/Pending Bankruptcy Cases

Has a bankruptcy case been filed by you or against you in the last 8 years? No Yes

If yes, where was case filed? _____ Case No: _____ Date Filed: _____

Are there currently any bankruptcy cases pending against you, your business, your spouse, or your spouse's business? No Yes

Part D. States You or Your Spouse Have Lived in the Last 3 Years

State: _____ When Domiciled in that State: _____ Husband/Wife/Both: _____

State: _____ When Domiciled in that State: _____ Husband/ Wife/ Both: _____

State: _____ When Domiciled in that State: _____ Husband/ Wife/ Both: _____

Section 2 - Property

Part A. Real Estate (Schedule A)

List all real estate which you own or are a joint owner of, even if you still owe money on the property.

Address and Description of Property	Owned by husband, wife, both or community?	Market Value	Your % ownership, or \$ amount of equity, if you and spouse are not sole owners	List all Mortgages, home equity loans, and liens: What is the \$ value of the loan, lien, or mortgage?	Who issued the lien, loan or mortgage? (Name, Address of Institution)(Also list account number) Or: please bring the most current mortgage statement	Office Use Only Exemptions/Amount In Default/Payment & Escrow Amounts
List Residence Here:				1st Mortgage (if any): _____ Total Amount in Default: _____ Mo. Payment: _____		Copies of note, deed, deed of trust and most recent bank statements required
				2nd Mortgage (if any) Total Amount in Default: _____ Mo. Payment: _____		
				3rd Mortgage (if any) Total Amount in Default: _____ Mo. Payment: _____		
				Are there any Judgements against you, your spouse or against both of you? () yes () No. If yes, provided details:		Please provide copies of the judgement
List Other Real Estate or Burial Plot (e.g., Timeshares, rental property, vacant lots)						

Part B. Personal Property (Schedule B)

For each type of property listed below, indicate whether you own any property of that category, and, if you do, fill in the remaining information. You can think of the market value as the *resale* value.

Type of Property	Do you have any? Yes/No	Description & Location	Owned by husband, wife, both or community?	Value	Office Use Only Exemptions?
1. Cash on hand. Cash, coins, uncashed checks, gift cards, and prepaid cards and other cash equivalents.					
2. Checking/savings account, certificates of deposit, other bank accounts					Need Account Statements for past 90 days.
3. Security deposits held by utility companies, landlord, or others. Prepaid items (tickets etc.)					
4. Complete List of Household Items		Complete Listing of Household Goods that follows at the end of this section			
5.					
6.					
7.					
8.					
9. Interest in insurance policies-specify refund or cancellation value. This category includes all types of insurance (e.g., Health, Rental, Auto, Dental, Vision etc.)					Copies of declaration page of whole life policies must be provided to attorney.
10. Annuities					
11. Interest in Educational IRAs or State tuition plan					

Type of Property	Do you have any? Yes/No	Description & Location	Owned by husband, wife, both or community?	Value	Office Use Only Exemptions?
12. Interests in pension or profit sharing plans		If you have an IRA was IRA inherited for has it always been yours? Did you make Excess Contributions?			
13. Stock and interests in incorporated/unincorporated business		This is includes a business operated as sole proprietorship			
14. Interests in partnerships/joint ventures					
15. Bonds (includes savings bonds)					
16. Accounts receivable (generally only applicable if you are in business, it is the money owed for goods delivered or services already performed)					
17. Alimony/family support to which you are entitled. (Need month amount and past due amounts owed)					Need copies of any order or separation agreement providing for such alimony child support
18. Other liquidated debts owed to you, including tax refunds					Need copies of last 2 years of tax returns
19. Equitable or future interests or life estates					

Type of Property	Do you have any? Yes/No	Description & Location	Owned by husband, wife, both or community?	Value	Office Use Only Exemptions?
20. Interests in estate of decedent or life insurance plan or trust					
21. Other contingent/unliquidated claims, including tax refunds, counterclaims		This would include anticipated tax refunds on returns not yet filed, or a return that you may have the right to amend. Also the right to sue someone.			
22. Patents, copyrights, other intellectual property					
23. Licenses, franchises					
24. Customer Lists or other					
25. Automobiles, trucks, trailers, and accessories. (Year, Make, Model and Mileage) Need value from the <u>NADA</u>		www.nadaguides.com - Please print the value of all your vehicles and then you will not need to fill out this specific question.			Copies of Car Loan Financing Documents, title if paid off and most recent statement must be provided
26. Boats, motors, and accessories					
27. Aircraft and accessories					
28. Office equipment, supplies					Provide list of office equipment
29. Machinery, fixtures etc. for business					Provide list of Machinery

Type of Property	Do you have any? Yes/No	Description & Location	Owned by husband, wife, both or community?	Value	Office Use Only Exemptions?
30. Inventory					
31. Animals					
32. Crops-growing or harvested					
33. Farming equipment and implements					
34. Farm supplies, chemicals, feed					
35. Other personal property of any kind not listed. (examples: gift cards, country club memberships, season tickets)					

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) **PERSONAL OR HOUSEHOLD GOODS** (net value not to exceed \$5,000.00 per debtor plus \$1,000.00 for first four dependents)

The number of dependents for exemption purposes is: _____. (This would be the number claimed on tax returns.)

Description of Property	Market Value (i.e. generally what value would you pay for the item at a thrift store for the item based on its age and condition)	Lien Holder	Amt. Lien	Net Value
Clothing & personal				
Kitchen appliances				
Stove				
Refrigerator				
Freezer				
Washing Machine				
Dryer				
China				
Silver				
Jewelry (for this use the value you would pay at a pawn shop for the jewelry)				
Living Room Furniture				
Den Furniture				
Bedroom Furniture				
Dining Room Furniture				
Lawn Furniture				
Television(s)				
() Stereo () Radio				
() VCR/DVD () Video Camera				
Other Audio Equipment				

Computer & Accessories				
Other Electronic Devices (Cell phones, Electronic Games etc.)				
Musical Instruments				
() Piano () Organ				
Air Conditioner				
Paintings/Art				
Books				
Other Collections (CD's, Tapes, Etc.)				
Lawn Mower				
Yard Tools				
Power Tools				
Other Tools				
Crops				
Recreational Equipment				
Firearms (used for household protection)				
Other Household Goods, Supplies & Furnishings				
Other Personal Items & Possessions				
Other Miscellaneous Items, Specify:				
VALUE CLAIMED AS EXEMPT:				

Have you purchased any personal property (everything that is not real estate is personal property) within the last 90 days? If so please list items purchased below:

Section 3 - Debts

List below all debts that you owe, or that creditors claim that you owe.

Type of Debt	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> Creditor Name and <u>Address</u>* Date/Range of dates when debt was incurred Account Number, if any Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
Home loans/ Mortgages							<p>Need Copy of Notice or Statement that shows monthly payment and past due balance, if any.</p>
Car/vehicle loans							
Other bank loans							

Type of Debt	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> Creditor Name and <u>Address</u>* Date/Range of dates when debt was incurred Account Number, if any Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
<p>Personal (non-bank) loans</p> <p>Includes friends and family.</p>							
<p>Student Loans</p>			<p>Note: Student Loans are listed in your bankruptcy but are not discharged (i.e., you will remain</p>				

Type of Debt	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> Creditor Name and <u>Address</u>* Date/Range of dates when debt was incurred Account Number, if any Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
Major credit card debts (Visa, Am Ex, MasterCard, Discover)							<p>Have any of these debts been incurred in the last 6 to 12 months? (Yes/No)</p> <p>Have any of these debts been the result of a recent balance transfer? (Yes/No)</p>
Department store credit card debts							

Type of Debt	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> 1. Creditor Name and <u>Address</u>* 2. Date/Range of dates when debt was incurred 3. Account Number, if any 4. Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
Other credit card debts (Gas cards, phone cards, etc.)							
Unpaid utility bills							
Unpaid rent							

Type of Debt	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> 1. Creditor Name and <u>Address</u>* 2. Date/Range of dates when debt was incurred 3. Account Number, if any 4. Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
Unpaid taxes							
Unpaid alimony or child support							
Unpaid Medical Bill							Including services not yet billed for but which were already performed
Unpaid service fees (to attorneys, accountants, etc.)							

<p>Type of Debt</p>	<p><u>The Addresses that must be used are the correspondence or inquiry address on your monthly statement not the billing address. Sometimes a creditor provides a bankruptcy notice address, if one is provided, use that address.</u></p> <p>You may obtain free credit reports at: www.annualcreditreport.com Please do not rely on the addresses on that report (they are often wrong) call the 800 numbers and obtain a correct address.</p> <ol style="list-style-type: none"> 1. Creditor Name and <u>Address</u>* 2. Date/Range of dates when debt was incurred 3. Account Number, if any 4. Contact person's name and address, if different 	<p>We now generally require you to purchase credit reports through us (\$40/\$80).</p> <p>Amount owed</p>	<p><u>If you bring in the original bills/statements for all creditors, then you do not have to complete this section of the questionnaire. Please note: not everyone to whom you owe money will send you statements (e.g., friends, family, people that have the right to sue you etc....)</u></p> <p>What is the debt for? Describe the collateral for this loan, if any. What is the estimated value of the collateral?</p>	<p>NEVER MENTION BANKRUPTCY TO THE COMPANY THAT FINANCED YOUR VEHICLE.</p> <p>You must list EVERYONE to whom you owe or may owe!</p> <p>Is there a codebtor, someone else who can be held responsible for the debt? If so, his/her name and address:</p>	<p>Do you dispute the debt?</p>	<p>Sched. D, E or F?</p>	<p style="text-align: center;"><i>Office Use Only</i></p> <p>Notes: lawsuit pending? Collection agency or attorney assigned?</p>
<p>All other unpaid debts/bills</p>	<p>PLEASE KNOW THAT ALL POTENTIAL DEBTS NEED TO BE LISTED EVEN IF NOT SPECIFICALLY ASKED FOR ABOVE. TYPICAL "CREDITORS" OMITTED INCLUDED DEBTS THAT YOU DISPUTE. EVEN IF YOU DISPUTE OR DENY OWNING THE PERSON OR ENTITY ANY MONEY, IT MUST BE LISTED IN YOUR BANKRUPTCY. Also please don't fail to list debts owed to relatives and friends.</p>						

Section 4 - Unexpired Leases and Contracts (Schedule G)

List below any lease or contracts that are still in effect that you are party to. Include residential, car and business leases, and service or business contracts.

Nature and Description of Contract	Name and Address of Other Party or Parties	Date that Contract Expires

Section 5 - Current Income

Marital Status

- Married
- Single
- Divorced
- Separated
- Widowed

List all dependents of you and your spouse, their ages, and their relationship to you		
Name	Age	Relationship

Part A. Debtor's Income

1. What is your occupation _____
2. Name and Address of your employer:

3. How long have you been employed there? _____
4. What is the gross amount of your paycheck, before taxes, other deductions are taken out? \$ _____
5. How often do you get paid? once a week
 every two weeks twice a month
 once a month other _____
6. Do you receive overtime pay outside of your salary? If so, how much per month? \$ _____
7. How much is taken out of each paycheck for taxes and social security? \$ _____
8. How much is taken out for insurance? \$ _____
9. How much for union dues? \$ _____
10. Are there other deductions? If so, what are they and how much? _____

Do you receive . . .

- a) income from business operations outside of your regular paycheck listed above? If so, what is the business and how much do you receive per month? _____ *Line A from next page, if applicable*
- b) income from real estate property? If so, how much per month? No Yes \$ _____
- c) interest or dividends? If so, how much per month?
 No Yes \$ _____
- d) alimony or family support payments for your use or for the care of your dependents? If so, how much per month? No Yes \$ _____
- e) social security or other forms of monetary government assistance? No Yes \$ _____
- f) retirement or pension money? No Yes \$ _____

Do you have any other sources of income not listed?

Part B. Joint Debtor's Income

1. What is your spouse's occupation? _____
2. Name and address of your spouse's employer:

3. How long employed there? _____
4. What is the gross amount of your spouse's paycheck, before taxes/other deductions? \$ _____
5. How often does your spouse get paid? once a week
 every two weeks twice a month
 once a month other _____
6. Does your spouse receive overtime pay outside of your salary? How much per month? \$ _____
7. How much is taken out of each paycheck for taxes and social security? \$ _____
8. How much is taken out for insurance? \$ _____
9. How much for union dues? \$ _____
10. Are there other deductions? If so, what are they and how much? _____

Does your spouse receive . . .

- a) income from business operations outside of the regular paycheck listed above? If so, what is the business and how much does your spouse receive per month? _____ *Line A from next page, if applicable*
- b) income from real estate property? If so, how much per month? No Yes \$ _____
- c) interest or dividends? If so, how much per month?
 No Yes \$ _____
- d) alimony or family support payments for spouse's use or for care of dependents? If so, how much per month?
 No Yes \$ _____
- e) social security or other forms of monetary government assistance? No Yes \$ _____
- f) retirement or pension money? No Yes \$ _____

Does your spouse have any other income not listed?

Are you or your spouse expecting any increase or decrease in salary of more than 10% in the next year? If so, explain.

ALSO PLEASE ATTACH COPY OF PAY CHECKS USED HERE (IT SHOULD BE A REPRESENTATIVE PAY CHECK.)

Section 6 - Current Expenses (Monthly)

Do you and your spouse maintain separate households? No Yes. If so, fill one page out for your household and another for your spouse's household.

The following questions ask for your expenses each month. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.), write in the amount and the frequency that you pay the amount.

Indicate how much you pay for each item each month . . .

- | | | |
|------------------------------------------------------------------------------------------------------|--|----------|
| 1. Your rent or your home mortgage | | \$ _____ |
| Does that amount include real estate taxes? <input type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Does it include property insurance? <input type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 2. Electricity and heating | | \$ _____ |
| 3. Water and sewage | | \$ _____ |
| 4. Telephone service/long distance | | \$ _____ |
| 5. Do you have any other utility bills? If so, what and how much per month? | | |
| _____ | | |
| _____ | | |
| 6. Home maintenance, including repairs and general upkeep | | \$ _____ |
| 7. Food | | \$ _____ |
| 8. Clothing | | \$ _____ |
| 9. Laundry and dry cleaning | | \$ _____ |
| 10. Medical and dental expenses | | \$ _____ |
| 11. Transportation (not including car payments) | | \$ _____ |
| 12. Entertainment, recreation, newspapers, magazines | | \$ _____ |
| 13. Charitable contributions | | \$ _____ |
| 14. Insurance not deducted from paycheck | | |
| a) homeowner's or renter's insurance | | \$ _____ |
| b) life insurance | | \$ _____ |
| c) health insurance | | \$ _____ |
| d) auto insurance | | \$ _____ |
| e) other insurance _____ | | \$ _____ |
| 15. Taxes not deducted from paycheck | | \$ _____ |
| 16. Installment payments for car, furniture, etc. (Specify) | | |
| _____ | | |
| _____ | | |
| 17. Alimony, maintenance, support paid to others | | \$ _____ |
| 18. Payments for support of dependents not living at home | | \$ _____ |
| 19. Expenses from operation of business <i>line B from next page, if applicable</i> | | \$ _____ |
| 20. Child Care Expenses and Children's Education Expenses. | | \$ _____ |
| 21. Homeowners Dues | | \$ _____ |
| 22. Other expenses not listed above _____ | | \$ _____ |
| _____ | | |

Do you expect any changes to your expenses within the next year? _____

Do you expect any changes in the next 5 years? _____

Section 7 - Statement of Financial Affairs

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under chapter 12 or 13, and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

If you have no information to report for a question, check the "NONE" box.

If you have no information to report for a question, check the "NONE" box.

1. Income from employment or operation of business

State your gross income from employment or operation of a business: If you have not received an income from employment during the **two years** immediately preceding this calendar year, check this box:

NONE

Period	\$ Amount	Source	Husband/Wife
January 1 of this year through date of commencement of case			
Last year (Jan 1-Dec 31)			
The year before last (Jan 1 - Dec. 31)			

Or, please bring in copies of W'2 or 1099's for these years.

2. Income other than from employment or operation of business

State the amount of income received other than from employment or operation of business during the **two years** immediately preceding the commencement of this case:

NONE

Period	\$ Amount	Source	Husband/Wife
January 1 of this year through date of commencement of case			
Last year (Jan 1-Dec 31)			
The year before last (Jan 1 - Dec. 31)			

3. Payments to creditors

a) List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than **\$600** to any creditor made within **90 days** immediately preceding the commencement of this case.

NONE

Name and Address of Creditor	Dates of Payments	Amount Paid	Amount Still Owed
-------------------------------------	--------------------------	--------------------	--------------------------

b) List all payments made within **one year** immediately preceding the commencement of this case to creditors who were “insiders”. (“Insiders” include your relatives, your business partners and their relatives, your corporations, or your affiliates.). **Also please note any payment of transfer of property on account of a debt that benefited an insider.**

NONE

Name and Address of Creditor and Relationship to You	Dates of Payment	Amount Paid	Amount Still Owed
-------------------------------------------------------------	-------------------------	--------------------	--------------------------

4. Suits, executions, garnishments and attachments

a) List all suits and administrative proceedings to which you are or were a party within **one year** preceding the filing of this case.

NONE

Caption of Suit and Case Number	Nature of Proceeding	Court of Agency and Location	Status or Disposition
----------------------------------------	-----------------------------	-------------------------------------	------------------------------

b) Describe all property that has been garnished, seized, or attached under any legal or equitable process within **one year** immediately preceding the commencement of this case.

NONE

Name and Address of Person/Company for Whom the Property Was Seized (Creditor)	Date of Seizure	Description and Value of Property
---------------------------------------------------------------------------------------	------------------------	------------------------------------------

5. Repossessions, foreclosures, and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller, within **one year** immediately preceding the commencement of this case.

NONE

Name and Address of Creditor	Date of Repossession, Foreclosure, Transfer or Return	Description and Value of Property
-------------------------------------	--------------------------------------------------------------	------------------------------------------

6. Assignments and receiverships

a) Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case.

NONE

Name and Address of Assignee	Date of Assignment	Terms of Assignment/Settlement
-------------------------------------	---------------------------	---------------------------------------

b) List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case.

NONE

Name and Address of Custodian	Name and Location of Court, Case Title and Number	Date of Order	Description and Value of Property
--------------------------------------	----------------------------------------------------------	----------------------	------------------------------------------

7. Gifts

List all gifts to a person or charity made within **two years** immediately preceding the commencement of this case aggregating more than \$600 in value per individual or charity.

NONE

Name and Address of Recipient	Relationship to You, if Any	Date of Gift	Description and Value of Gift
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8. Losses

List all losses from fire, theft, gambling or other casualty within **one year** immediately preceding the commencement of this case **or since the commencement of this case.**

NONE

Description and Value of Property	Description of Circumstances and Amount Covered by Insurance, if Any	Date of Loss
------------------------------------------	-----------------------------------------------------------------------------	---------------------

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consultation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of the case.

NONE

Name and Address of Payee	Date of Payment	Name of Person Who Paid, if Not You	Amount of Money/Description and Value of Property
----------------------------------	------------------------	--------------------------------------------	----------------------------------------------------------

10. Other transfers, (including sale of your property)

List all other property, other than property transferred in your ordinary course of business or financial affairs, transferred either absolutely or as a security within **two year** immediately preceding the commencement of this case.

NONE

Name and Address of Transferee and Relationship to You	Date of Transfer	Description of Property Transferred and Value Received
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11. Closed financial accounts

List all financial accounts and instruments held in your name or for your benefit which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case.

NONE

Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing
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12. Safe deposit boxes and Storage Units

List each safe deposit or other box or depository in which you have or have had securities, cash, or other valuables within **one year** immediately preceding commencement of this case. **Also disclose any storage units you have used to store property within the last year, other than your home.**

NONE

Name and Address of Bank or Other Depository, Or Name of Storage Company	Name and Address of Those With Access to Box or storage unit	Description of Contents	Date of Transfer, if Any
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13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within **90 days** preceding the commencement of this case.

NONE

Name and Address of Creditor	Date of Setoff	Amount of Setoff
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14. Property held for another person

List all property that you hold or control that is owned by another person.

NONE

Name and Address of Owner	Description and Value of Property	Location of Property
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15. Prior address of debtor

If you have moved within the three (3) years immediately preceding the commencement of this case, list all residences during the last two years, excluding your present address.

NONE

Address	Your Name at the Time	Dates of Occupancy
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*The following questions, #16-21, are only to be answered if you are a corporation or partnership or if you have been, in the 4 YEARS immediately preceding this case, an officer, director, managing executive, *OR* owner of more than 5% of the voting securities of the corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or otherwise self-employed.*

16. Nature, location and name of business in which you were an officer, director, partners, managing executive, or sole proprietor, or in which you owned 5% or more of voting or equity securities within the 4 YEARS immediately preceding the commencement of this case.

NONE

Name and Address	Nature of Business	Dates of Operation - Beginning and End
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17. Books, records, and financial statements

a) List all bookkeepers and accountants who, within the **six years** immediately preceding the filing of this bankruptcy case, kept or supervised the keeping of books of account and records.

NONE

Name and Address	Dates Services Rendered
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b) List all firms or individuals who, within the **two years** immediately preceding the filing of this bankruptcy case, have audited the books of account and records, or prepared a financial statement of the debtor.

NONE

Name and Address	Dates Services Rendered
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c) List all firms or individuals who, at the time of the commencement of this case, were in possession of your books of account and records. If the records are not available, explain.

NONE

Names and Address	Comments
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d) List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NONE

Name and Address	Date Issued
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18. Inventories

a) List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

NONE

Date of Inventory	Inventory Supervisor	Dollar Amount of Inventory (specify cost, market, or other basis)
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b) List the name and address of the person possessing the records of each of the two inventories reported in a.) above.

NONE

Date of Inventory	Name and Address of Custodian of Inventory Records
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19. Current partners, officers, directors, and shareholders

a) If your business is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NONE

Name and Address	Nature and Percentage of Interest
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b) If your business is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 % or more of the voting securities of the corporation.

NONE

Name and Address	Title	Nature and Percentage of Stock Ownership
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20. Former partners, officers, directors and shareholders

a) If your business is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NONE

Name and Address	Date of Withdrawal
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b) If your business is a corporation, list all officers or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NONE

Name and Address	Title	Date of Termination
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21. Withdrawals from a partnership or distributions by a corporation

If your business is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NONE

Name and Address of Recipient, and Relationship to you	Date and Purpose of Withdrawal	Amount of Money or Description and Value of Property
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22. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar devise of which you are a beneficiary? (these are often called asset-protection devices).

NONE

Name of Trust	Description and value of the property transferred	Date Transferred was made
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