

# Chapter 7 / 13 Bankruptcy Worksheet

## **IMPORTANT!**

**This page must be read and signed before your case will be filed.**

**IF THIS SET OF WORKSHEETS IS NOT FILLED OUT COMPLETELY, WE CANNOT PREPARE THE PETITION, AND YOUR APPOINTMENT WILL BE RESCHEDULED.**

**IF YOU HAVE QUESTIONS, PLEASE CALL BEFORE YOU COME IN.**

**BRING THE WORKSHEET WITH YOU TO YOUR APPOINTMENT.**

**DO NOT DROP OFF OR MAIL THE WORKSHEET.**

### **Questions?**

Please call. If I am not available, my staff will set up a phone appointment with me. An audio recording explaining how to fill out this form is available on my website at [TheLegalCenter.com](http://TheLegalCenter.com) on the Bankruptcy page.

### **Let Me Know! Please call immediately if you:**

- ◆ are involved in any accidents
- ◆ receive any legal papers
- ◆ receive any large sums of money including tax refunds

*Also, do not buy sell or transfer anything without asking me first.*

### **Bankruptcy Petition Preparation Checklist**

#### **Did you.....**

- \_\_\_\_\_ List ALL creditors with complete address? ( [Annualcreditreport.com](http://Annualcreditreport.com) )
- \_\_\_\_\_ List and value ALL assets wherever they may be?
- \_\_\_\_\_ Read the information sheet?
- \_\_\_\_\_ Read the Representation Agreement?

**I understand** that I must attend the Meeting of the Creditors and that all fees must be paid in full BEFORE the case is filed (Chapter 7).

**I understand** that the penalties for making a false statement or concealing property in a bankruptcy case is fine of up to \$500,000 or imprisonment from up to 5 years or both. (18 USC Ss 152, 3571)

**I understand** that any debts I incur after I decide to file bankruptcy are not dischargeable and may be considered fraud if not repaid.

**I understand I may lose my tax refund.**

**I have read and understand the above. (There will be a test!)**

\_\_\_\_\_  
Client

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

UNITED STATES BANKRUPTCY COURT  
VOLUNTARY PETITION  
MIDDLE DISTRICT OF FLORIDA  
CHAPTER 7 / 13

**Debtor**

**Joint-Debtor**

Full Name

\_\_\_\_\_

Any other names used in the last 6 years.

\_\_\_\_\_

Complete Street Address (include City,State,Zip)

\_\_\_\_\_

Mailing Address (if different)

\_\_\_\_\_

County of Residence

\_\_\_\_\_

Social Security No. (Tax I.D.)

\_\_\_\_\_

**EMPLOYMENT STATUS AND OCCUPATIONS**

DEBTOR

SPOUSE

Position/How long \_\_\_\_\_ / \_\_\_\_\_ | \_\_\_\_\_ / \_\_\_\_\_

Employer \_\_\_\_\_ | \_\_\_\_\_

Address \_\_\_\_\_ | \_\_\_\_\_

City/State/Zip \_\_\_\_\_ | \_\_\_\_\_

**DEPENDENTS / MARITAL STATUS**

1. The debtor is \_\_\_married\_\_\_ single \_\_\_divorced\_\_\_ separated.

2. The name of the debtor's spouse. \_\_\_\_\_

3. Name, age, and relationship of dependents.

\_\_\_\_\_ age \_\_\_\_\_ relationship \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ relationship \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ relationship \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ relationship \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_ relationship \_\_\_\_\_

# ASSETS

## REAL PROPERTY

Do you own **any** real estate including, condo's, time shares, or lots. Or, is your name on anyone else's real estate?  
YES \_\_\_\_\_ NO \_\_\_\_\_

1.) Address: \_\_\_\_\_ Keep \_\_\_ / Surrender \_\_\_

Description: \_\_\_ Homestead residence \_\_\_ house \_\_\_ lot \_\_\_ acreage \_\_\_ time-share

Fair Market Value \_\_\_\_\_ Amount Owed 1st Mort. \_\_\_\_\_ To Whom \_\_\_\_\_

Amount Owed 2nd Mort. \_\_\_\_\_ To Whom \_\_\_\_\_

Are there Tax liens, Construction liens, \_\_\_ VA Loan, \_\_\_ FHA Loan

2.) Address: \_\_\_\_\_ Keep \_\_\_ / Surrender \_\_\_

Description: \_\_\_ Homestead residence \_\_\_ house \_\_\_ lot \_\_\_ acreage \_\_\_ time-share

Fair Market Value \_\_\_\_\_ Amount Owed 1st Mort. \_\_\_\_\_ To Whom \_\_\_\_\_

Amount Owed 2nd Mort. \_\_\_\_\_ To Whom \_\_\_\_\_

Are there Tax liens, Construction liens, VA Loan, \_\_\_ FHA Loan \_\_\_

3.) Other

## PERSONAL PROPERTY

### Value

Please answer all of these questions with a numerical value. If the answer is zero, put zero. If the items are somewhere besides your residence, state where they can be located at.

1. Cash on hand. Money not in banks. ....

2. Checking, savings accounts \_\_\_\_\_,  
certificate of deposit \_\_\_\_\_,  
other brokerage or financial accounts \_\_\_\_\_ TOTAL.....

3. Security deposits with public utilities \_\_\_\_\_  
telephone companies \_\_\_\_\_,  
landlords and others \_\_\_\_\_ TOTAL.....

4. Household goods, supplies, furnishings, audio, video, computers.  
**Use personal property worksheet.** TOTAL.....

5. Art objects, Collections and Collectibles including books, pictures,  
antiques, stamps, coins, records, tapes and CDs. ....

6. Wearing apparel and clothing. ....

7. Furs and jewelry. ....

8. Firearms, sports, photographic and other hobby equipment .....

9. Interests in insurance policies. (cash value) .....

10. Annuities .....

11. Interests in IRA, ERISA, Keogh or other pension or profit sharing  
plans. Do you have a retirement plan?  
.....

12. Stock and interests in incorporated and unincorporated businesses.....

13. Interests in partnerships or joint ventures .....

14. Gov't, corporate bonds, negotiable, nonnegotiable instruments.....

15. Accounts receivable. Does anyone owe you money? .....

16. Alimony, maintenance, support and property settlements to which you may be entitled. Lump sum payments or arrearages. ....

17. Other liquidated debts owing debtor including tax refunds. ....

18. Equitable and future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than listed in Sched-A. ....

19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. ....

20. Other contingent, unliquidated claims of every nature, including counterclaims of debtor and rights to setoff claims. Do you have the right to sue anyone? .....

21. Patents, copyrights, and other intellectual property. ....

22. Licenses, franchises other general intangibles. ....

23. Autos, trucks, trailers, other vehicles or accessories. **Nada.com** average trade-in value  
Make, model, year, **VIN#.** trade in value payoff owed to mileage

#1 \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_  
Keep\_\_\_ / Surrender\_\_\_

#2 \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_  
Keep\_\_\_ / Surrender\_\_\_

#3 \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_  
Keep\_\_\_ / Surrender\_\_\_

#4 \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_  
Keep\_\_\_ / Surrender\_\_\_

24. Boats, motors, and accessories. ....

25. Aircraft and accessories. ....

26. Office equipment, furnishings, supplies .....

27. Machinery, fixtures, equipment, supplies in business .....

- 28. Inventory .....\_\_\_\_\_
- 29. Animals .....\_\_\_\_\_
- 30. Crops - growing or harvested .....\_\_\_\_\_
- 31. Farming equipment, and implements .....\_\_\_\_\_
- 32. Farm supplies, chemicals and feed .....\_\_\_\_\_
- 33. Other personal property of any other kind not already listed .....\_\_\_\_\_

# PERSONAL PROPERTY CHECKLIST

List everything you own. Also, please indicate items that you still owe money on. Ex: Sears, Rooms 2 Go, Best Buy.

## LIVING ROOM

\_\_ Sofa.....\$ \_\_\_\_\_  
\_\_ Love seat.....\$ \_\_\_\_\_  
\_\_ Recliner .....\$ \_\_\_\_\_  
\_\_ Coffee/End tables.....\$ \_\_\_\_\_  
\_\_ Lamp.....\$ \_\_\_\_\_  
\_\_ Television/stand.....\$ \_\_\_\_\_  
  
\_\_ Stereo .....\$ \_\_\_\_\_  
  
\_\_ Entertainment Center....\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## DINING ROOM

\_\_ Table/Chairs.....\$ \_\_\_\_\_  
\_\_ Cabinet/Hutch.....\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## KITCHEN

\_\_ Table/Chairs.....\$ \_\_\_\_\_  
\_\_ Refrigerator.....\$ \_\_\_\_\_  
\_\_ Microwave.....\$ \_\_\_\_\_  
\_\_ Utensils.....\$ \_\_\_\_\_  
\_\_ Cookware.....\$ \_\_\_\_\_  
\_\_ Dishes.....\$ \_\_\_\_\_  
\_\_ Small Appliances.....\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## MASTER BEDROOM

\_\_ Bed.....\$ \_\_\_\_\_  
\_\_ Dresser.....\$ \_\_\_\_\_  
\_\_ TV.....\$ \_\_\_\_\_  
\_\_ Stereo.....\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## BEDROOM TWO

\_\_ Bed.....\$ \_\_\_\_\_  
\_\_ Dresser.....\$ \_\_\_\_\_  
\_\_ Stereo.....\$ \_\_\_\_\_  
\_\_ TV.....\$ \_\_\_\_\_  
  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## BEDROOM THREE

\_\_ Bed.....\$ \_\_\_\_\_  
\_\_ Dresser.....\$ \_\_\_\_\_  
\_\_ Vanity.....\$ \_\_\_\_\_  
\_\_ TV.....\$ \_\_\_\_\_  
\_\_ Stereo/sound equip...\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## BEDROOM FOUR/OFFICE

\_\_ Bed.....\$ \_\_\_\_\_  
\_\_ Dresser.....\$ \_\_\_\_\_  
\_\_ Vanity.....\$ \_\_\_\_\_  
  
\_\_ TV.....\$ \_\_\_\_\_  
\_\_ Stereo.....\$ \_\_\_\_\_  
\_\_ Desk.....\$ \_\_\_\_\_  
\_\_ Computer/typewriter.....\$ \_\_\_\_\_  
\_\_ Cabinet.....\$ \_\_\_\_\_  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

## GARAGE/UTILITY

\_\_ Washer/Dryer.....\$ \_\_\_\_\_  
\_\_ Freezer.....\$ \_\_\_\_\_  
\_\_ Lawn mower.....\$ \_\_\_\_\_  
\_\_ Lawn Items .....\$ \_\_\_\_\_  
\_\_ Tools.....\$ \_\_\_\_\_  
\_\_ Grill.....\$ \_\_\_\_\_  
\_\_ Lawn Furniture.....\$ \_\_\_\_\_  
  
\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL THIS PAGE=====➔ \$ \_\_\_\_\_**

Valuation of personal property

Percentage of original new price

1st year.....50%  
2nd year.....33%  
3rd year.....20%  
4th year.....15%  
5th year.....10%

# DEBTS

- A. Do you owe money to past or present employees?  Yes /  No
- B. Do you owe money to any employee benefit plans?  Yes /  No
- C. Do you owe money to farmers or fishermen?  Yes /  No
- D. Do you owe or are you holding any deposit money for purchase, lease, or rental property, or services for personal, family or household use that were not delivered or provided?  Yes /  No
- E. Do you owe any taxes?  U.S. Government (IRS),  State Government  Property Taxes
- How much? \_\_\_\_\_

**INCOME TAXES** If you owe back taxes it is your responsibility to provide to the attorney the following facts **BEFORE** the case is filed.

**Tax Year 20**\_\_\_\_\_.

- A.) Was a return filed  Yes  No. Date\_\_\_\_\_
- B.) Was an amendment filed  Yes  No. Date\_\_\_\_\_.
- C.) Were additional Assessments filed  Yes  No. Date\_\_\_\_\_.

**Tax Year 20**\_\_\_\_\_.

- A.) Was a return filed  Yes  No. Date\_\_\_\_\_
- B.) Was an amendment filed  Yes  No. Date\_\_\_\_\_.
- C.) Were additional Assessments filed  Yes  No. Date\_\_\_\_\_.

**Tax Year 20**\_\_\_\_\_.

- A.) Was a return filed  Yes  No. Date\_\_\_\_\_
- B.) Was an amendment filed  Yes  No. Date\_\_\_\_\_.
- C.) Were additional Assessments filed  Yes  No. Date\_\_\_\_\_.

**Tax Year 20**\_\_\_\_\_.

- A.) Was a return filed  Yes  No. Date\_\_\_\_\_
- B.) Was an amendment filed  Yes  No. Date\_\_\_\_\_.
- C.) Were additional Assessments filed  Yes  No. Date\_\_\_\_\_.

# List of Creditors

**ALL CREDITORS.** A creditor is any company, person, government, organization or anything else you owe money to. The court wants to know who you owe money to. Therefore, you must put on the list **EVERY** creditor. Even my *mortgage*? **YES**. Even my *car payment*? **YES**. Even *creditors I want to keep*? **YES**. This includes mortgages, car financing, even the creditors you want to keep.

**COMPLETE ADDRESSES.** Please list the name and full mailing address of all creditors. **IT IS VERY IMPORTANT THAT THE ADDRESSES BE CORRECT.** Billing address work well. If the only you have is the collection agent, please let me know who they are collecting for.

**SECURED OR UNSECURED**

**Secured.** Any debt that financed a specific purchase of property. Examples are mortgages, car loans, furniture purchases and large purchases at department stores. Also, finance company loans with collateral or liens are secured. If you wrote down a list of personal possessions or gave them your car title, its probably secured. (If you don't pay the bill, they can get the goods.)

With secured debts, you have three choices, *Reaffirm, Redeem, Return or Avoid*. **Reaffirm**= Continue paying, keep the goods and the debt. **Redeem**= Pay the creditor only the actual value of the goods instead of the whole balance. **Return**= Surrender the goods, pay no more. **Avoid** the lien= Erase the lien on certain types of collateral. Finance company debts secured by household goods are the most common type to be avoided.

**Unsecured.** Any other debts. Credit cards, companies, signature loans, friends, family, medical bills, hospitals.

Name Address (complete!)	Account #	List Security (if secured)	Market Value	Amount Owed
1 Mortgage	Year:			Keep ____ / Surrender ____
	Regular Payment:	Arrearage:		
2 Mortgage	Year:			Keep ____ / Surrender ____
	Regular Payment:	Arrearage:		
3 Mortgage	Year:			Keep ____ / Surrender ____
	Regular Payment:	Arrearage:		
4 Mortgage	Year:			Keep ____ / Surrender ____
	Regular Payment:	Arrearage:		



Name Address (complete!)	Account #	List Security (if secured)	Market Value	Amount Owed
5 Vehicle	Year:			Keep ____ / Surrender ____
	Regular Payment:		Arrearage:	
6 Vehicle	Year:			Keep ____ / Surrender ____
	Regular Payment:		Arrearage:	
7 Vehicle	Year:			Keep ____ / Surrender ____
	Regular Payment:		Arrearage:	
8 Vehicle	Year:			Keep ____ / Surrender ____
	Regular Payment:		Arrearage:	
9	Year:			
10	Year:			
11	Year:			
12	Year:			
13	Year:			

Name Address (complete!)	Account #	List Security (if secured)	Market Value	Amount Owed
14	Year:			
15	Year:			
16	Year:			
17	Year:			
18	Year:			
19	Year:			
20	Year:			
21	Year:			
22	Year:			
23	Year:			
24	Year:			
25	Year:			

## Your Income

- Monthly  
 Semi-monthly (twice a month)  
 Bi-weekly (every other week)  
 Weekly

### Payroll

Gross Income \_\_\_\_\_  
Estimated Overtime \_\_\_\_\_

#### Deductions

Federal Income Tax \_\_\_\_\_  
State Income Tax \_\_\_\_\_  
FICA/Medicare \_\_\_\_\_  
Insurance \_\_\_\_\_  
Union Dues \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_

### Other Monthly Income

From your Business \_\_\_\_\_  
From Real Property \_\_\_\_\_  
Interest & Dividends \_\_\_\_\_  
Alimony, Child Support \_\_\_\_\_  
Social Security \_\_\_\_\_  
Gov't Assistance \_\_\_\_\_  
Pension or retirement \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_

Do you expect a 10% change of income in the next year?  Yes  No.

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## Spouse's Income

- Monthly  
 Semi-monthly (twice a month)  
 Bi-weekly (every other week)  
 Weekly

### Payroll

Gross Income \_\_\_\_\_  
Estimated Overtime \_\_\_\_\_

#### Deductions

Federal Income Tax \_\_\_\_\_  
State Income Tax \_\_\_\_\_  
FICA/Medicare \_\_\_\_\_  
Insurance \_\_\_\_\_  
Union Dues \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_

### Other Monthly Income

From your Business \_\_\_\_\_  
From Real Property \_\_\_\_\_  
Interest & Dividends \_\_\_\_\_  
Alimony, child support \_\_\_\_\_  
Social Security \_\_\_\_\_  
Gov't Assistance \_\_\_\_\_  
Pension or retirement \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_

Does the spouse expect a 10% change of income in the next year?  Yes  No

## Current Expenses

1. Is this a Joint Filing with your Spouse?

No  Yes

If **Yes**, does the Joint Debtor live in a separate household?

No  Yes

2. Please list all dependents of you and your spouse with their age and relationship to you (if applicable).

**Name/ age/ relationship**

**Who does the dependent live with?**


Do you and your spouse live separately and maintain separate households?  No  Yes. If **yes**, please let your attorney know and they will have to provide you with an additional copy of this section to detail the expenses for the completely separate 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.

3. Do your expenses include another person's expenses other than yourself and your dependents?

No  Yes

**Indicate how much you pay for each item each month:**

4. Primary Rent or Home Mortgage: \$ \_\_\_\_\_

Does that amount include real estate taxes?

No  Yes

If **yes**, how much do you pay? \$ \_\_\_\_\_

Does that amount include property, homeowner's, or renter's insurance?

No  Yes

If **yes**, how much do you pay? \$ \_\_\_\_\_

Does that amount include any Home maintenance, repair, or upkeep expenses?

No  Yes

If **yes**, how much do you pay? \$ \_\_\_\_\_

Does that amount include any Homeowner's association or condominium dues?

No  Yes

If **yes**, how much do you pay? \$ \_\_\_\_\_

5. Are there Additional Mortgage payments? \$ \_\_\_\_\_

No  Yes

If **yes**, how much do you pay? \_\_\_\_\_

6. Utilities: \$ \_\_\_\_\_

a. Electricity and heating fuel:..... \$ \_\_\_\_\_

b. Water and sewer: ..... \$ \_\_\_\_\_

c. Telephone service/long distance: ..... \$ \_\_\_\_\_

d. Do you have any other utility bills? If **yes**, describe and enter monthly amount below:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

7. Food and housekeeping supplies..... \$ \_\_\_\_\_

8. Childcare and Children Education Costs..... \$ \_\_\_\_\_

9. Clothing, laundry, and dry cleaning: ..... \$ \_\_\_\_\_

10. Personal care products and services: ..... \$ \_\_\_\_\_

11. Medical and dental expenses: ..... \$ \_\_\_\_\_

12. Transportation (do NOT include car payments): ..... \$ \_\_\_\_\_

13. Recreation, entertainment, newspapers, magazines, and books: ..... \$ \_\_\_\_\_

14. Charitable contributions and religious donations:..... \$ \_\_\_\_\_

15. Insurance NOT deducted from wages or included in home mortgage payments or other real estate property expenses: **(Do not include amounts entered in Line 4 or Line 20)**

    a. Life insurance: ..... \$ \_\_\_\_\_

    b. Health insurance:..... \$ \_\_\_\_\_

    c. Auto insurance: ..... \$ \_\_\_\_\_

    d. Other insurance (*describe and list monthly amount*):

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

16. Tax bills NOT deducted from wages or included in home mortgage payments or other real estate property expenses:

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

17. Installment payments for car, furniture, etc. (*Describe*):

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

18. Alimony, maintenance and support paid to others: ..... \$ \_\_\_\_\_

19. Payments for support of additional dependents not living at your home: ..... \$ \_\_\_\_\_

20. Other Real Estate Property expenses **NOT** included with Rent or Home Mortgage Property **(Do not include amounts entered in Line 4 or Line 5)**

    a. Mortgage payment on other Real Estate Property ..... \$ \_\_\_\_\_

    b. Taxes on other Real Estate Property ..... \$ \_\_\_\_\_

    c. Other Real Property, Homeowner's, or Renter's Insurance payments ..... \$ \_\_\_\_\_

    d. Home maintenance (including repairs and upkeep) ..... \$ \_\_\_\_\_

    e. Homeowner's association or condominium dues ..... \$ \_\_\_\_\_

21. Other expenses (*Describe*): **(please see "Additional Expenses" below before putting anything here)**

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

        \_\_\_\_\_ \$ \_\_\_\_\_

Describe any increase or decrease in expenses you expect to occur within the next year?

\_\_\_\_\_

**Due to the nature of the Federal Bankruptcy forms there is a special separate category of expenses that needs to be filled out with some unusual numbering.**

***Please ignore the numbering and fill out everything that you can below:***

**Additional Expenses (707(b)Expenses for Form 22)**

26. or 31.	Mandatory payroll deductions not already listed:		\$	_____
	_____		\$	_____
	_____		\$	_____
28. or 33.	Court ordered payments not already listed:		\$	_____
	_____		\$	_____
	_____		\$	_____
29. or 34.	Education for employment or for a physically or mentally challenged child: .....	\$		_____
30. or 35.	Child care ( <i>baby sitting, day care, nursery &amp; preschool, etc.</i> ): .....	\$		_____
34b. or 39b.	Disability Insurance ( <i>if not listed above</i> ): .....	\$		_____
34c. or 39c.	Health Savings Account: .....	\$		_____
35. or 40.	Care for elderly, chronically ill or disabled family members: .....	\$		_____
36. or 41.	Protection from family violence: .....	\$		_____
38. or 43.	Education expense for your children under 18: .....	\$		_____
55. (c13's)	Non-mandatory contributions to retirement accounts ( <i>including loan repayments</i> ):		\$	_____
	_____		\$	_____
	_____		\$	_____

4.3 weeks = 1 month

## Statement of Financial Affairs

If you are filing jointly with your spouse, include information about both you and your spouse. If you know that 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.

### 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

#### Debtor

Period	Dollar Amount you were paid	Source (i.e. employer name or business name)
January 1 of this year through date of commencement of case	_____	_____
Last year (January 1 - December 31)	_____	_____
The year before last (January 1 - December 31)	_____	_____

#### Joint Debtor or Spouse (if applicable)

Period	Dollar Amount you were paid	Source (i.e. employer name or business name )
January 1 of this year through date of commencement of case	_____	_____
Last year (January 1 - December 31)	_____	_____
The year before last (January 1 - December 31)	_____	_____

### 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

#### Debtor

Period	Dollar Amount you were paid	Source
During the last year	_____	_____
Year before last	_____	_____

#### Joint Debtor or Spouse (if applicable)

Period	Dollar Amount you were paid	Source
During the last year	_____	_____
Year before last	_____	_____

### 3. Payments to creditors

- a. **If your debts are primarily consumer debts (i.e. non-business)**, list all payments totaling over **\$600** made within the last 90 days on loans, installment purchases of goods or services, and other debts. Indicate with an asterisk (\*) any payments that were made on account of a domestic support obligation (i.e. *alimony, child support, etc.*) or that were made as part of an alternative repayment plan.

NONE

Name and Address of Creditor	Dates of Payments	Amount Paid	Amount Still Owed
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- b. **If your debts are primarily non-consumer debts (i.e. business)**, list all payments totaling over **\$5,850** made within the last 90 days to any creditor.

NONE

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

- c. **All debtors**, list all payments made within **one year** to any "insider" or for the benefit of any "insider". (*"Insiders" include your relatives, your business partners and their relatives, your corporations, or your affiliates.*)

NONE

Name and Address of Creditor / Relationship to Debtor	Dates of Payments	Amount Paid	Amount Still Owed
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### 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 or 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 or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.

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
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## 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 consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this 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
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## 10. Other transfers (including sale of your property)

a. 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 years** immediately preceding the commencement of this case

NONE

Name and Address of Transferee / Relationship to Debtor	Date of Transfer	Description of Property and Value Received
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b. List all property you transferred within **10 years** immediately preceding the commencement of this case to a self-settled trust, or a similar device of which you are the beneficiary.

Name of Trust or Similar Device	Date of Transfer	Amount of Money or Description and Value of Property or Interest
_____	_____	_____

## 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
_____	_____	_____

## 12. Safe deposit boxes

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.

NONE

Name and Address of Bank or Other Depository	Name and Address of those with Access to Box or Depository	Description of Contents	Date of Transfer, if any
_____	_____	_____	_____

## 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
_____	_____	_____

## 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
_____	_____	_____

## 15. Prior address of debtor

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

NONE

Address	Your Name at the Time	Dates of Occupancy
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## 16. Spouses and Former Spouses

If you reside or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **eight-year period** immediately preceding the commencement of the case, identify the name of your spouse and of any former spouse who resides or resided with you in the community property state.

NONE

Name
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## 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil surface water, ground water, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- a. List the name and address of every site for which you received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

NONE

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
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- b. List the name and address of every site for which you provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NONE

Site Name and Address

Name and Address of Governmental Unit

Date of Notice

Environmental Law

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which you are or were a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NONE

Name and Address of Governmental Unit

Docket Number

Status or Disposition

### 18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole partnership, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NONE

Name

Taxpayer I.D. Number (EIN)

Address

Nature of Business

Beginning and End Dates of Operation

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as define in 11 U.S.C. § 101.

NONE

Name

Address