THE DOCUMENT PEOPLE

Bankruptcy Questionnaire

1. Have you ever filed for Bankruptcy before? ☐ Yes ☐ No

   If you answered YES please provide us with information about your previously filed Bankruptcy.

   Case Number: _____
   Date Filed: _____
   Court Info: _____
   Chapter: _____

2. Has your landlord filed a judgment against you, the debtor? ☐ Yes ☐ No

3. Do you own a business? ☐ Yes ☐ No

4. Are you physically disabled, incapacitated or an active military? ☐ Yes ☐ No

5. Do you own/have possession of any property that poses or is alleged to pose threat of imminent and identifiable harm to public health or safety? ☐ Yes ☐ No

6. Do you have a spouse or former spouse (within the last 8 years)? ☐ Yes ☐ No

   If YES, please provide name of any spouse(s) or former spouse(s):

   _____
   Name(s)

7. Which exemption would you like us to use to exempt your personal property? ☐ State ☐ Federal
   Please refer to the **EXEMPTION** pages next for a list assets and exemptions

8. Do you own real estate property? ☐ Yes ☐ No
   If you have responded **YES**, please pick the appropriate ***real estate exemption*** from the plan you have selected (see real estate exemptions in the **EXEMPTION** pages, next to the home icon)

_____
All answers in this questionnaire were provided by me
I did NOT receive any legal advice by the store's staff

If you are reading this questionnaire electronically, you'll find plenty of sticky notes to help

BANKRUPTCY CHECK LIST

To get started, you will need…

_____ 1. MEANS TEST WORKSHEET – This must be completed to the best of your knowledge and returned to us with your completed bankruptcy workbook.

_____ 2. BANKRUPTCY WORKBOOK – This must be completed as accurately as possible and to the best of your knowledge.

Return these two workbooks to The Document People, when completed. Complete as much as you can. We are not allowed to sit with you and help you complete it. We will review for accuracy and completion.

Meanwhile…

_____ 3. CONTACT A CREDIT COUNSELOR – Preferably a Non-profit agency; we refer all of our customers to the following agency:
My BK NOW Phone 877.692.5669, www.mybknow.com. Let them know you are filing Bankruptcy and need to get your Credit Counseling Completion Certificate.

_____ 4. BANKRUPTCY PETITION – Once we call you to inform you that your documents are ready to be signed, it will be your responsibility to double check our work. If you fail to do so, other charges will apply.

Once prepared and ready to file, make sure you have the following:

_____ A. Petition plus 1 copy
_____ B. Means Test
_____ C. Proof of income for the last 60 days.
You'll need pay stubs for the last 60 days. If 0$ income provide a letter stating so.
_____ D. Credit Counseling Completion Certificate
_____ E. $306 Cash
_____ F. Identification Card and Social Security Card (on same occasions these IDs are required)
_____ G. Make sure you have filed appropriate tax returns for the last 3 years for both Federal and State, or last filed tax return.

Attending the bankruptcy hearing, you will need:

_____ Identification Card and Social Security Card
_____ For your convenience, keep copies of everything you have filed

The following item must be filed with the court before the court can discharge your bk

_____ Debtor Education Course Completion Certificate. This is the second course you must complete with your credit counselor.

This check list was created by The Document People to assist our customers with their bankruptcy procedure.
This information is not and should not be considered legal advice.

Plan 1 (**Federal**) 704 Exemptions

Description	Exempt amount	(CCP) **
Homestead	$75,000	703.140 (a) (1)
Homestead (debtor's spouse or a minor dependent living in the residence has no interest or only a community property interest)	$100,000	703.140 (a) (2)
Homestead (debtor is 65 or older, disabled, or is 55 or older and has income less than $15,000 (or $20,000 if married)	$175,000	703.140 (a) (3)
Motor Vehicle	$2,900	704.010
Household furnishings/personal effects-ordinarily and reasonably necessary	100%	704.020
Home Improvements Materials	$3,050	704.030
Jewelry, heirlooms, artwork	$7,625	704.040
Health aids	100%	704.050
Tools of the trade used by debtor and spouse (commercial vehicle exemption)	$9,700	704.060
Public benefits, one depositor is designated payee	$1,525	704.080
Public benefits, two or more depositors are designated payee	$2,275	704.080
Social security benefits, one depositor is designated payee	$3,050	704.080
Social security benefits, two or more depositors are designated payee	$4,575	704.080
Inmate trust account	$3,050	704.090
Unmatured life insurance policies (not including loan value)	100%	704.100
Loan value of unmatured life insurance policies	$24,450	704.100
Matured life insurance policies	* *TENS*	704.100
Public retirement benefits (all)	100%	704.110
Vacation credit-state/public employees	100%	704.113
Retirement plans-private, not self-employed (all)	100%	704.115 (a),(3),(b),(e)
Retirement plans-self-employed (Keogh, SEP-IRA, IRA)	100% * *TENS*	704.115 (a),(3),(b),(e)
Unemployment, disability and strike benefits	100%	704.120
Disability and health insurance benefits	100%	704.130
Personal injury causes of action	100%	704.140
Personal injury settlement and awards of damages	* *TENS*	704.140
Periodic payment of personal injury damages or settlement	75%	704.140
Wrongful death causes of action or recovery	100%	704.150
Periodic payment of wrongful death damages or settlement	75%	704.150
Workers compensation benefits	100% *****	704.160
Welfare, Fraternal, or Society benefits	100%	704.170
Relocation benefits	100%	704.180
Student financial aid from institution of higher education	100%	704.190
Burial plots	100%	704.200
Property not subject to enforcement of money judgment (all)	100%	704.210
Unpaid Wages	75%	706.050
Wages (lesser of 75% of disposable earnings or 30x federal minimum wage)	75%	706.050
Cash employment bonds (all)	100%	***
Public Aid	100%	****

* *TENS* = To the Extent Needed for Support
** CCP = California Code of Civil Procedure
*** Cal. Lab. Code §404
**** Cal. Wel & Inst. Code §11002
***** Except for child support

EXEMPTIONS

Plan 2 (State) 703 Exemptions

Description	Exempt amount	(CCP) **
Homestead or burial plot – Real property, including co-op or, mobile home to $25,575; unused portion of homestead may be applied to any property (See wildcard below)	$25,575 single $51,150 joint	703.140 (b) (1)
Wildcard - $1,100 interest in any property plus unused amount from homestead exemption	$25,575	703-140 (b) (5)
One motor vehicle, if filing jointly, two vehicles may be exempt up to $3,300 each, so long as both vehicles are not titled only in one of the debtor's name	$5,100 for each debtor	703.140 (b) (2)
Household goods and furnishings, household books, wearing apparel, appliances, books, animals, crops, to exceed $650 for a particular item or musical instruments that are held primarily for personal, household, or family use	100%	703.140 (b) (3)
Jewelry held for personal, household, or family use	$1,525	703.140 (b) (4)
Tools of trade, professional books and implements	$7,575	703.140 (b) (6)
Unmatured life insurance contract except credit insurance policy	100%	703.140 (b) (7)
Accrued dividends, interest and loan value for unmatured life insurance contract	$13,675 for each debtor	703.140 (b) (8)
Certain stock bonus, pension, profit sharing, annuities, or similar plans	* *TENS*	703.140 (b) (10) (E)
Crime victim's reparation benefits	100%	703.140 (b) (11) (A)
Wrongful death payments	* *TENS*	703.140 (b) (11) (B)
Life insurance proceeds	* *TENS*	703.140 (b) (11) (C)
Loss of future earnings payments	* *TENS*	703.140 (b) (11) (E)
Business or professional license	100%	695.060
Health aids professionally prescribed	100%	703.140 (b) (9)
Social security, unemployment, public assistance	100%	703.140 (b) (10) (A)
Veterans' benefits	100%	703.140 (b) (10) (B)
Disability, illness, unemployment benefits	100%	703.140 (b) (10) (C)
Alimony, support, or separate maintenance	* *TENS*	703.140 (b) (10) (D)

* *TENS* = To the Extent Needed for Support
** CCP = California Code of Civil Procedure

Statement of Your Current Monthly Income

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.

   ❑ **Not married.** Fill out Column A, lines 2-11.

   ❑ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.

   ❑ **Married and your spouse is NOT filing with you. You and your spouse are:**

   ❑ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.

   ❑ **Living separately or are legally separated**. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write $0 in the space.

				Column A **Debtor 1**	*Column B* **Debtor 2 or non-filing spouse**
2.	**Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions).			$_____	$_____
3.	**Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.			$_____	$_____
4.	**All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.			$_____	$_____
5.	**Net income from operating a business, profession, or farm**	**Debtor 1**	**Debtor 2**		
	Gross receipts (before all deductions)	$_____	$_____		
	Ordinary and necessary operating expenses	– $_____	– $_____		
	Net monthly income from a business, profession, or farm	$_____	$_____	**Copy here➔**	$_____ $_____
6.	**Net income from rental and other real property**	**Debtor 1**	**Debtor 2**		
	Gross receipts (before all deductions)	$_____	$_____		
	Ordinary and necessary operating expenses	– $_____	– $_____		
	Net monthly income from rental or other real property	$_____	$_____	**Copy here➔**	$_____ $_____
7.	**Interest, dividends, and royalties**			$_____	$_____

	Column A **Debtor 1**	Column B **Debtor 2 or non-filing spouse**
8. **Unemployment compensation** Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓	$_____	$_____
For you	$_____	
For your spouse	$_____	
9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.	$_____	$_____
10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.		
_____	$_____	$_____
_____	$_____	$_____
Total amounts from separate pages, if any.	+ $_____	+ $_____
11. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	$_____ +	$_____ = $_____ **Total current monthly income**

Part 2: Determine Whether the Means Test Applies to You

12. **Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. **Copy line 11 here** → $_____

Multiply by 12 (the number of months in a year). **x** 12

12b. The result is your annual income for this part of the form. 12b. $_____

13. **Calculate the median family income that applies to you.** Follow these steps:

Fill in the number of people in your household >>>>>

Now compare the amount in 12b. with the Median Income for your family size to the right ==========>

If your Median Income is lower, then you qualify.

If it's higher you'll be able to claim exemptions and cost of living adjustements to reduce it.

Ask a member of our staff to provide you with the supplement.

MEDIAN INCOME CALIFORNIA

Family size	Income
1 person	$50,519
2 people	$66,458
3 people	$70,732
4 people *	$81,740

** Add $8,100 for each individual in excess of 4*

District of: (ex: Central California). Central California is the district for Los Angeles and Orange Counties	Division of:
Name of **Debtor** (if individual, enter Last, First, Middle):	Name of **Joint Debtor** (spouse) (Last, First, Middle):
Social Security or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):	Social Security or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State):	Street Address of Joint Debtor (No. and Street, City, and State):
County of Residence:	County of Residence:
Mailing Address of Debtor (if different from street address):	Mailing Address of Debtor (if different from street address):
Location of Principal Assets of Business Debtor (if different from street address above):	

Type of Debtor (Form of Organization) (Check one box)	**Nature of Business (Check one box)**	**Nature of Debts (Check one box)**
❒ Individual (includes Joint Debtors) ❒ Corporation (includes LLC and LLP) ❒ Partnership ❒ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	❒ Health Care Business ❒ Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) ❒ Railroad ❒ Stockbroker ❒ Commodity Broker ❒ Clearing Bank ❒ Other	❒ Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose." ❒ Debts are debts primarily business debts.

❒ Debtor estimates that funds will be available for distribution to unsecured creditors.
❒ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors	Estimated Assets	Estimated Liabilities
❒ 1-49 ❒ 50-99 ❒ 100-199 ❒ 200-999 ❒ 1,000-5,000 ❒ 5,001-10,000 ❒ 10,001-25,000 ❒ 25,001-50,000 ❒ 50,001-100,000 ❒ Over 100,000	❒ 1-49 ❒ 50-99 ❒ 100-199 ❒ 200-999 ❒ 1,000-5,000 ❒ 5,001-10,000 ❒ 10,001-25,000 ❒ 25,001-50,000 ❒ 50,001-100,000 ❒ Over 100,000	❒ 1-49 ❒ 50-99 ❒ 100-199 ❒ 200-999 ❒ 1,000-5,000 ❒ 5,001-10,000 ❒ 10,001-25,000 ❒ 25,001-50,000 ❒ 50,001-100,000 ❒ Over 100,000

Schedules A and B: Your Properties

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. **Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

❑ No. Go to Part 2.
❑ Yes. Where is the property?

1.1. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.
❑ Single-family home
❑ Duplex or multi-unit building
❑ Condominium or cooperative
❑ Manufactured or mobile home
❑ Land
❑ Investment property
❑ Timeshare
❑ Other _____

Who has an interest in the property? Check one.
❑ Debtor 1 only
❑ Debtor 2 only
❑ Debtor 1 and Debtor 2 only
❑ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____
Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
_____

❑ **Check if this is community property** (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.
❑ Single-family home
❑ Duplex or multi-unit building
❑ Condominium or cooperative
❑ Manufactured or mobile home
❑ Land
❑ Investment property
❑ Timeshare
❑ Other _____

Who has an interest in the property? Check one.
❑ Debtor 1 only
❑ Debtor 2 only
❑ Debtor 1 and Debtor 2 only
❑ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____
Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
_____

❑ **Check if this is community property** (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

1.3. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.

- ❑ Single-family home
- ❑ Duplex or multi-unit building
- ❑ Condominium or cooperative
- ❑ Manufactured or mobile home
- ❑ Land
- ❑ Investment property
- ❑ Timeshare
- ❑ Other _____

Who has an interest in the property? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____

Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

_____

❑ **Check if this is community property** (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ❑ No
- ❑ Yes

3.1. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____

Current value of the portion you own? $_____

If you own or have more than one, describe here:

3.2. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____

Current value of the portion you own? $_____

3.3. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

3.4. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ❑ No
- ❑ Yes

4.1. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

If you own or have more than one, list here:

4.2. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

❑ No
❑ Yes. Describe..... $_____

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

❑ No
❑ Yes. Describe..... $_____

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

❑ No
❑ Yes. Describe..... $_____

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

❑ No
❑ Yes. Describe..... $_____

10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

❑ No
❑ Yes. Describe..... $_____

11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

❑ No
❑ Yes. Describe..... $_____

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

❑ No
❑ Yes. Describe..... $_____

13. **Non-farm animals**

Examples: Dogs, cats, birds, horses

❑ No
❑ Yes. Describe..... $_____

14. **Any other personal and household items you did not already list, including any health aids you did not list**

❑ No
❑ Yes. Give specific information..... $_____

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ❑ No
- ❑ Yes..... Cash: ..... $_____

17. **Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ❑ No
- ❑ Yes..... Institution name:

17.1. Checking account:	_____	$_____
17.2. Checking account:	_____	$_____
17.3. Savings account:	_____	$_____
17.4. Savings account:	_____	$_____
17.5. Certificates of deposit:	_____	$_____
17.6. Other financial account:	_____	$_____
17.7. Other financial account:	_____	$_____
17.8. Other financial account:	_____	$_____
17.9. Other financial account:	_____	$_____

18. **Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ❑ No
- ❑ Yes..... Institution or issuer name:

_____ $_____
_____ $_____
_____ $_____

19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ❑ No
- ❑ Yes. Give specific information about them. .....

Name of entity:	% of ownership:	
_____	_____%	$_____
_____	_____%	$_____
_____	_____%	$_____

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

❑ No
❑ Yes. Give specific information about them. .....

Issuer name:

_____ $_____
_____ $_____
_____ $_____

21. **Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

❑ No
❑ Yes. List each account separately..

Type of account: Institution name:

401(k) or similar plan: _____ $_____
Pension plan: _____ $_____
IRA: _____ $_____
Retirement account: _____ $_____
Keogh: _____ $_____
Additional account: _____ $_____
Additional account: _____ $_____

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

❑ No
❑ Yes.....

Institution name or individual:

Electric: _____ $_____
Gas: _____ $_____
Heating oil: _____ $_____
Security deposit on rental unit: _____ $_____
Prepaid rent: _____ $_____
Telephone: _____ $_____
Water: _____ $_____
Rented furniture: _____ $_____
Other: _____ $_____

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

❑ No
❑ Yes.....

Issuer name and description:

_____ $_____
_____ $_____
_____ $_____

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

❑ No
❑ Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

_____ $_____
_____ $_____
_____ $_____

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

❑ No
❑ Yes. Give specific information about them. .. $_____

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

❑ No
❑ Yes. Give specific information about them. .. $_____

27. **Licenses, franchises, and other general intangibles**
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

❑ No
❑ Yes. Give specific information about them. .. $_____

Money or property owed to you? **Current value of the portion you own?** Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

❑ No
❑ Yes. Give specific information about them, including whether you already filed the returns and the tax years. .....

Federal: $_____
State: $_____
Local: $_____

29. **Family support**
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

❑ No
❑ Yes. Give specific information. .....

Alimony: $_____
Maintenance: $_____
Support: $_____
Divorce settlement: $_____
Property settlement: $_____

30. **Other amounts someone owes you**
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

❑ No
❑ Yes. Give specific information. ..... $_____

31. **Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

❑ No

❑ Yes. Name the insurance company of each policy and list its value. ...

Company name:	Beneficiary:	Surrender or refund value:
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____

32. **Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

❑ No

❑ Yes. Give specific information. ..... $_____

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

❑ No

❑ Yes. Describe each claim. ..... $_____

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

❑ No

❑ Yes. Describe each claim. ..... $_____

35. **Any financial assets you did not already list**

❑ No

❑ Yes. Give specific information. ..... **$**_____

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** ..... ➔ **$**_____

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. **Do you own or have any legal or equitable interest in any business-related property?**

❑ No. Go to Part 6.

❑ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

❑ No

❑ Yes. Describe ..... $_____

39. **Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

❑ No

❑ Yes. Describe ..... $_____

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ❑ No
- ❑ Yes. Describe..... $_____

41. **Inventory**

- ❑ No
- ❑ Yes. Describe..... $_____

42. **Interests in partnerships or joint ventures**

- ❑ No
- ❑ Yes. Describe..... Name of entity: % of ownership:

_____ _____% $_____
_____ _____% $_____
_____ _____% $_____

43. **Customer lists, mailing lists, or other compilations**

- ❑ No
- ❑ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))**?**
  - ❑ No
  - ❑ Yes. Describe..... $_____

44. **Any business-related property you did not already list**

- ❑ No
- ❑ Yes. Give specific information .....

_____ $_____
_____ $_____
_____ $_____
_____ $_____
_____ $_____
_____ $_____

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ❑ No. Go to Part 7.
- ❑ Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ❑ No
- ❑ Yes..... $_____

48. **Crops—either growing or harvested**

❑ No
❑ Yes. Give specific information. .....

$_____

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

❑ No
❑ Yes.....

$_____

50. **Farm and fishing supplies, chemicals, and feed**

❑ No
❑ Yes.....

$_____

51. **Any farm- and commercial fishing-related property you did not already list**

❑ No
❑ Yes. Give specific information. .....

$_____

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** ..... ➔

$_____

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

❑ No
❑ Yes. Give specific information. .....

$_____
$_____
$_____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (*See Instructions Above.*)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			VALUE $					
ACCOUNT NO.			VALUE $					
ACCOUNT NO.			VALUE $					
____ continuation sheets attached			Subtotal ► (Total of this page)				$	$
			Total ► (Use only on last page)				$ (Report also on Summary of Schedules.)	$ (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled “Total” on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled “Totals” on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled “Subtotals” on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled “Totals” on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to $12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

** Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to $6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to $2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (*See instructions above.*)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Account No.									
Account No.									
Account No.									
Subtotals➤ (Totals of this page)							$	$	
Total➤ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							$		
Totals➤ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								$	$

Sheet no. ___ of ___ continuation sheets attached to Schedule of Creditors Holding Priority Claims

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed.R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Creditor's name *(Ex. Citibank)*	Mailing Address, including zip code *(ex. 123 Main St., Anywhere, CA 90000)*	Date of claim	Amount of claim	Husband, Wife Joint, Community *(married filers only)*
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐

_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐
_____ _____ Account # _____	_____ _____ _____	__/__/____ MM/DD/YY	$ _____	H / W / J / C ☐ ☐ ☐ ☐

If you have more entries, please print out additional copies of this page

SCHEDULE G – EXECUTORY CONTRACTS AND UNESPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parentor guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 andFed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and full mailing address of other parties to lease or contract	Description of contract or lease and nature of debtor's interest. State whether lease is for nonresidential real property. State contract number or any Government contract.	Will lease be assumed pursuant to 11 U.S.C. §365 (p)(2)?
		☐ YES ☐ NO
		☐ YES ☐ NO
		☐ YES ☐ NO
		☐ YES ☐ NO
		☐ YES ☐ NO
		☐ YES ☐ NO

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides 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 the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

   If you have more than one job, attach a separate page with information about additional employers.

   Include part-time, seasonal, or self-employed work.

   Occupation may Include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	☐ Employed ☐ Not employed	☐ Employed ☐ Not employed
Occupation	_____	_____
Employer's name	_____	_____
Employer's address	_____ Number Street _____ _____ City State ZIP Code	_____ Number Street _____ _____ City State ZIP Code
How long employed there?	_____	_____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	$_____	$_____
3. **Estimate and list monthly overtime pay.**	3.	+ $_____	+ $_____
4. **Calculate gross income.** Add line 2 + line 3.	4.	$_____	$_____

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ➔	4.	$_____	$_____
5. **List all payroll deductions:**			
5a. **Tax, Medicare, and Social Security deductions**	5a.	$_____	$_____
5b. **Mandatory contributions for retirement plans**	5b.	$_____	$_____
5c. **Voluntary contributions for retirement plans**	5c.	$_____	$_____
5d. **Required repayments of retirement fund loans**	5d.	$_____	$_____
5e. **Insurance**	5e.	$_____	$_____
5f. **Domestic support obligations**	5f.	$_____	$_____
5g. **Union dues**	5g.	$_____	$_____
5h. **Other deductions.** Specify: _____	5h.	+ $_____	+ $_____
6. **Add the payroll deductions**. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	$_____	$_____
7. **Calculate total monthly take-home pay.** Subtract line 6 from line 4.	7.	$_____	$_____
8. **List all other income regularly received:**			
8a. **Net income from rental property and from operating a business, profession, or farm** Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	$_____	$_____
8b. **Interest and dividends**	8b.	$_____	$_____
8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive** Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	$_____	$_____
8d. **Unemployment compensation**	8d.	$_____	$_____
8e. **Social Security**	8e.	$_____	$_____
8f. **Other government assistance that you regularly receive** Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	$_____	$_____
8g. **Pension or retirement income**	8g.	$_____	$_____
8h. **Other monthly income.** Specify: _____	8h.	+ $_____	+ $_____
9. **Add all other income**. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	$_____	$_____
10. **Calculate monthly income.** Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	$_____ +	$_____ = $_____

11. **State all other regular contributions to the expenses that you list in *Schedule J*.**

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.

Specify: _____ 11. + $_____

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income.
Write that amount on the *Summary of Schedules* and *Statistical Summary of Certain Liabilities and Related Data,* if it applies 12. $_____
Combined monthly income

13. **Do you expect an increase or decrease within the year after you file this form?**

☐ No.
☐ Yes. Explain: _____

Schedule J: Your Expenses

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**

   ☐ No. Go to line 2.
   ☐ Yes. **Does Debtor 2 live in a separate household?**
      ☐ No
      ☐ Yes. Debtor 2 must file a separate Schedule J.

2. **Do you have dependents?**

   Do not list Debtor 1 and Debtor 2.

   Do not state the dependents' names.

   ☐ No
   ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?**

   ☐ No
   ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

		Your expenses
4.	**The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4. $_____
	If not included in line 4:	
4a.	Real estate taxes	4a. $_____
4b.	Property, homeowner's, or renter's insurance	4b. $_____
4c.	Home maintenance, repair, and upkeep expenses	4c. $_____
4d.	Homeowner's association or condominium dues	4d. $_____

		Your expenses
5. **Additional mortgage payments for your residence**, such as home equity loans	5.	$_____
6. **Utilities:**		
6a. Electricity, heat, natural gas	6a.	$_____
6b. Water, sewer, garbage collection	6b.	$_____
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$_____
6d. Other. Specify: _____	6d.	$_____
7. **Food and housekeeping supplies**	7.	$_____
8. **Childcare and children's education costs**	8.	$_____
9. **Clothing, laundry, and dry cleaning**	9.	$_____
10. **Personal care products and services**	10.	$_____
11. **Medical and dental expenses**	11.	$_____
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$_____
13. **Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$_____
14. **Charitable contributions and religious donations**	14.	$_____
15. **Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	$_____
15b. Health insurance	15b.	$_____
15c. Vehicle insurance	15c.	$_____
15d. Other insurance. Specify:_____	15d.	$_____
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	$_____
17. **Installment or lease payments:**		
17a. Car payments for Vehicle 1	17a.	$_____
17b. Car payments for Vehicle 2	17b.	$_____
17c. Other. Specify:_____	17c.	$_____
17d. Other. Specify:_____	17d.	$_____
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form B 6I).**	18.	$_____
19. **Other payments you make to support others who do not live with you.** Specify:_____	19.	$_____
20. **Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I*: *Your Income.***		
20a. Mortgages on other property	20a.	$_____
20b. Real estate taxes	20b.	$_____
20c. Property, homeowner's, or renter's insurance	20c.	$_____
20d. Maintenance, repair, and upkeep expenses	20d.	$_____
20e. Homeowner's association or condominium dues	20e.	$_____

21. **Other**. Specify: _____ 21. +$_____

22. **Your monthly expenses.** Add lines 4 through 21.
The result is your monthly expenses. 22. $_____

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*. 23a. $_____

23b. Copy your monthly expenses from line 22 above. 23b. −$_____

23c. Subtract your monthly expenses from your monthly income.
The result is your *monthly net income*. 23c. $_____

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.
☐ Yes. Explain here:

Statement of Financial Affairs

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

❑ Married
❑ Not married

2. **During the last 3 years, have you lived anywhere other than where you live now?**

❑ No
❑ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		❑ Same as Debtor 1	❑ Same as Debtor 1
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____		_____	
_____ City State ZIP Code		_____ City State ZIP Code	
		❑ Same as Debtor 1	❑ Same as Debtor 1
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____		_____	
_____ City State ZIP Code		_____ City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

❑ No
❑ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. **Did you have any income from employment or from operating a business during this year or the two previous calendar years?**
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

❑ No
❑ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	**Gross income** (before deductions and exclusions)	**Sources of income** Check all that apply.	**Gross income** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____
For last calendar year: (January 1 to December 31, _____) YYYY	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____
For the calendar year before that: (January 1 to December 31, _____) YYYY	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____	❑ Wages, commissions, bonuses, tips ❑ Operating a business	$_____

5. **Did you receive any other income during this year or the two previous calendar years?**
Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

❑ No
❑ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	**Gross income from each source** (before deductions and exclusions)	**Sources of income** Describe below.	**Gross income from each source** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	$_____	_____	$_____
	_____	$_____	_____	$_____
	_____	$_____	_____	$_____
For last calendar year: (January 1 to December 31, _____) YYYY	_____	$_____	_____	$_____
	_____	$_____	_____	$_____
	_____	$_____	_____	$_____
For the calendar year before that: (January 1 to December 31, _____) YYYY	_____	$_____	_____	$_____
	_____	$_____	_____	$_____
	_____	$_____	_____	$_____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

❑ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $6,225* or more?

❑ No. Go to line 7.

❑ Yes. List below each creditor to whom you paid a total of $6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

❑ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $600 or more?

❑ No. Go to line 7.

❑ Yes. List below each creditor to whom you paid a total of $600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for…
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	❑ Mortgage ❑ Car ❑ Credit card ❑ Loan repayment ❑ Suppliers or vendors ❑ Other _____
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	❑ Mortgage ❑ Car ❑ Credit card ❑ Loan repayment ❑ Suppliers or vendors ❑ Other _____
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	❑ Mortgage ❑ Car ❑ Credit card ❑ Loan repayment ❑ Suppliers or vendors ❑ Other _____

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

❑ No
❑ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
_____ Insider's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	
_____ Insider's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
Include payments on debts guaranteed or cosigned by an insider.

❑ No
❑ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
_____ Insider's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	
_____ Insider's Name _____ Number Street _____ _____ City State ZIP Code	_____ _____ _____	$_____	$_____	

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

❑ No
❑ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title_____ _____ Case number _____		_____ Court Name _____ Number Street _____ City State ZIP Code	❑ Pending ❑ On appeal ❑ Concluded
Case title_____ _____ Case number _____		_____ Court Name _____ Number Street _____ City State ZIP Code	❑ Pending ❑ On appeal ❑ Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

❑ No. Go to line 11.
❑ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
_____ Creditor's Name _____ Number Street _____ City State ZIP Code	**Explain what happened** ❑ Property was repossessed. ❑ Property was foreclosed. ❑ Property was garnished. ❑ Property was attached, seized, or levied.	_____	$_____
_____ Creditor's Name _____ Number Street _____ City State ZIP Code	**Explain what happened** ❑ Property was repossessed. ❑ Property was foreclosed. ❑ Property was garnished. ❑ Property was attached, seized, or levied.	_____	$_____

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

❑ No
❑ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code		_____	$_____

Last 4 digits of account number: XXXX–___ ___ ___ ___

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

❑ No
❑ Yes

Part 5: List Certain Gifts and Contributions

13. **Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than $600 per person?**

❑ No
❑ Yes. Fill in the details for each gift.

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
_____ Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____		_____ _____	$_____ $_____

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
_____ Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____		_____ _____	$_____ $_____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than $600 to any charity?

❑ No
❑ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than $600	Describe what you contributed	Date you contributed	Value
_____ Charity's Name _____ _____ Number Street _____ City State ZIP Code		_____	$_____
		_____	$_____

Part 6: List Certain Losses

15. **Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

❑ No
❑ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*	Date of your loss	Value of property lost
		_____	$_____

Part 7: List Certain Payments or Transfers

16. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

❑ No
❑ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
_____ Person Who Was Paid _____ Number Street _____ _____ City State ZIP Code _____ Email or website address _____ Person Who Made the Payment, if Not You		_____	$_____
		_____	$_____

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You		_____	$_____
		_____	$_____

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**
Do not include any payment or transfer that you listed on line 16.

❑ No
❑ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code		_____	$_____
		_____	$_____

18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

❑ No
❑ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you _____			_____
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you _____			_____

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

❑ No
❑ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		_____
_____		

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

❑ **No**
❑ **Yes. Fill in the details.**

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
_____ Name of Financial Institution _____ Number Street _____ _____ City State ZIP Code	XXXX–___ ___ ___ ___	❑ Checking ❑ Savings ❑ Money market ❑ Brokerage ❑ Other_____	_____	$_____
_____ Name of Financial Institution _____ Number Street _____ _____ City State ZIP Code	XXXX–___ ___ ___ ___	❑ Checking ❑ Savings ❑ Money market ❑ Brokerage ❑ Other_____	_____	$_____

21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

❑ **No**
❑ **Yes. Fill in the details.**

	Who else had access to it?	Describe the contents	Do you still have it?
_____ Name of Financial Institution _____ Number Street _____ _____ City State ZIP Code	_____ Name _____ Number Street _____ City State ZIP Code		❑ No ❑ Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
- ☐ Yes. Fill in the details.

Name of Storage Facility Number Street City State ZIP Code	Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you still have it?
			☐ No ☐ Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No
- ☐ Yes. Fill in the details.

Owner's Name Number Street City State ZIP Code	Where is the property? Number Street City State ZIP Code	Describe the property	Value
			$_____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ***Environmental law*** **means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.**
- ***Site*** **means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.**
- ***Hazardous material*** **means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.**

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☐ No
- ☐ Yes. Fill in the details.

Name of site Number Street City State ZIP Code	Governmental unit Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	Date of notice
			_____

25. Have you notified any governmental unit of any release of hazardous material?

- ❑ No
- ❑ Yes. Fill in the details.

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site Number Street City State ZIP Code	Governmental unit Number Street City State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ❑ No
- ❑ Yes. Fill in the details.

	Court or agency	Nature of the case	Status of the case
Case title Case number	Court Name Number Street City State ZIP Code		❑ Pending ❑ On appeal ❑ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ❑ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ❑ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ❑ A partner in a partnership
- ❑ An officer, director, or managing executive of a corporation
- ❑ An owner of at least 5% of the voting or equity securities of a corporation

- ❑ No. None of the above applies. Go to Part 12.
- ❑ Yes. Check all that apply above and fill in the details below for each business.

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name Number Street City State ZIP Code		EIN: __ __ – __ __ __ __ __ __ __
	Name of accountant or bookkeeper	**Dates business existed**
		From _____ To _____

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name Number Street City State ZIP Code		EIN: __ __ – __ __ __ __ __ __ __
	Name of accountant or bookkeeper	**Dates business existed**
		From _____ To _____

_____ Business Name _____ Number Street _____ _____ City State ZIP Code	**Describe the nature of the business**	**Employer Identification number** **Do not include Social Security number or ITIN.** **EIN:** __ __ – __ __ __ __ __ __ __
	Name of accountant or bookkeeper	**Dates business existed**
		From _____ **To** _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ❑ **No**
- ❑ **Yes. Fill in the details below.**

	Date issued
_____ Name	_____ MM / DD / YYYY
_____ Number Street _____ _____ City State ZIP Code	

Payment Advices Cover Sheet _ Under 11 U.S.C. § 521 (a)(1)(B)(iv)

Debtor(s) declare(s) under penalty of perjury that the following is true and correct *(check one):*

Debtor Joint Debtor

☐ ☐ I have not been employed by any employer within the 60 days before the date of the filing of the petition

☐ ☐ I was employed by an employer within the 60 days before the date I filed my bankruptcy petition, but I have not received payment advices or other evidence of payment because _____

☐ ☐ I have received payment advices or other evidence of payment within 60 days before the date I filed my bankruptcy petition from any employer, and they are attached.

===///===///===///===///===///===///===///===///===///===///===///===///===///===///===///===///===///===///===

Individual Debtor's Statement of Intention _ Debts secured by property of the estate

Property No. 1

Creditor's Name:	Describe Property Securing Debt:
Property will be *(check one):* ☐ Surrender ☐ Retained Property is *(check one):* ☐ Claimed as exempt ☐ NOT claimed as exempt	If retaining the property, I intend to *(check at least 1)* ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _____ *(ex., avoid lien using 11 U.S.C. § 522 (f))*

Property No. 2

Creditor's Name:	Describe Property Securing Debt:
Property will be *(check one):* ☐ Surrender ☐ Retained Property is *(check one):* ☐ Claimed as exempt ☐ NOT claimed as exempt	If retaining the property, I intend to *(check at least 1)* ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _____ *(ex., avoid lien using 11 U.S.C. § 522 (f))*