

BASIC INFORMATION

Part A. Filing Information

Joint _____ Individual _____ Corporate _____

Marital Status: Married Single Divorced Separated Widowed

Full Legal Name, including middle name:

Have you used any other names in the past six years? ___ No ___ Yes

If yes, list other names: _____ Social Security Number _____ - _____ - _____

Street Address: _____ Home phone: _____

City: _____ State: ___ Zip: _____ County: _____ Work Phone: _____

Have you lived in this county for at least 180 days? Yes _____ No _____ Alternative Phone: _____

If you have a **different** mailing address or use a post office box, please list:

Part B. Name and Address of Spouse if Filing Jointly

Full Legal Name _____

Have you used any other names in the past six years? ___ No ___ Yes

If yes, list other names: _____ Social Security Number _____ - _____ - _____

Is your address the same as your spouse? _____ Yes If not, enter it below:

Street Address: _____ Home Phone: _____

City: _____ State: ___ Zip: _____ County: _____ Work Phone: _____

Have you lived at this address for at least 180 days? ___ No ___ Yes

If you have a **different** mailing address from above or use a post office box, please list:

Part C. Previous Credit Counseling

Name of Credit Counseling Agency _____ Contact Person: _____

Address: _____ Phone: _____

Was there a charge for this service? _____ How much? _____ Per Month Were they helpful to you? _____

List the date and amount of payments made in the last year: _____

Part D. Prior/Pending Bankruptcy Cases

Has a bankruptcy case been filed for you in the last six years? If yes, Chapter _____ Case No. _____

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

ASSETS

Part A. Real Estate or Mobile Home

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

1. Residence. List Complete Address and Description of Property:

(i.e., 2 bedroom frame house and 1 acre of land at 1 Easy St., Boone, NC 28607) Date Purchased _____

Description: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Owned by: Husband alone _____ Wife alone _____ Jointly Owned _____ Percent of ownership _____

Market Value of Home: \$ _____ Source: Official Appraisal Drive By Appraisal

Name of Realtor or Appraisal: _____ Date of Appraisal _____

Tax Value: \$ _____ Purchase Price: \$ _____ Monthly Payment: 1st \$ _____ 2nd \$ _____

Do you want to: Keep Making Payments Surrender the Home Home is paid for

A. First Mortgage Bank: _____ Mortgage Payoff: \$ _____

Address: _____ Account No.: _____

City: _____ State _____ Zip: _____ Interest Rate: \$ _____ %

Co-Debtor? Name _____ Address _____

Are you current on the payments? _____ If no, exact arrearage amount \$ _____ Months Behind _____

B. Second Mortgage Bank: _____ Mortgage Payoff: _____

Address: _____ Account No.: _____

City: _____ State _____ Zip: _____ Interest Rate: _____ %

Co-Debtor? Name _____ Address _____

Are you current on the payments? _____ If no, exact arrearage amount \$ _____ Months Behind _____

2. Other Real Estate

Description: _____ Date of Purchase _____

Street Address: _____ City: _____ State: _____ Zip: _____

Owned by: Husband alone _____ Wife alone _____ Jointly Owned _____ Percent of ownership _____

Market Value of Property \$ _____ Source: Official Appraisal Drive By Appraisal

Name of Realtor or Appraisal: _____ Date of Appraisal _____

Tax Value: \$ _____ Purchase Price: \$ _____ Monthly Payment: \$ _____

Mortgage Bank: _____ Mortgage Payoff: \$ _____

Address: _____ Account No.: _____

City: _____ State _____ Zip: _____ Interest Rate: \$ _____ %

Co-Debtor? Name _____ Address _____

Are you current on the payments? _____ If no, what is the exact arrearage amount \$ _____ Months behind _____

Do you want to: Keep Making Payments Surrender the Property Property is paid for

FINANCIAL RESOURCES

Part B. Personal Property

1. Expected cash on hand at time of filing \$ _____

2. Checking Account:

Bank Name: _____ Expected balance at filing:

What names are on the account? _____ \$ _____

3. Savings Account:

Bank Name: _____ Expected balance at filing:

Bank Name: _____

What names are on the account? _____ \$ _____

***We need a written description of withdrawal options on all retirement accounts
and a copy of your last statement on all retirement and 401(k) accounts.***

3. Retirement Account:

Name of Plan: _____ Whose Name is it in?: _____

Type of Plan: _____

Current balance:

Employer Name: _____ \$ _____

Are there any loans against the account? Yes ___ No ___ Balance of Loan: \$ _____

Address of Plan Administrator if loans: _____

5. Other Employee Benefit Plan:

Name of Plan: _____ Whose Name is it in?: _____

Type of Plan: _____

Current balance:

Employer Name: _____ \$ _____

Are there any loans against the account? Yes ___ No ___ Balance of Loan: \$ _____

Address of Plan Administrator if loans: _____

6. Do you expect to receive a TAX REFUND for this year? Year 200 _____ If yes, how much? \$ _____

Did you receive a TAX REFUND last year? Year 200 _____ If yes, how much? \$ _____

7. Does anyone owe you money? What for? _____ Amount Owed:

Name: _____ \$ _____

Street Address: _____

City: _____ State: _____ Zip: _____

8. Are you expecting a gift, inheritance or settlement in the next 180 days? _____

9. Life Insurance Policies

Company: _____ Whose Name is it in? _____

Type of Policy: Term (No cash value) Whole Life (with cash value _____

If policy has a cash surrender value, how much is it? _____

Name & Relationship of Beneficiary(ies) _____

10. Stocks/Bonds _____ \$ _____

11. Interest in Partnership or Business: Business Name _____ Value of Your Interest: _____

Name/Address of Partner: _____ \$ _____

City: _____ State: _____ Zip: _____ Attach Business Sheets

HOUSEHOLD GOODS

Please make your best estimate on the value of the items below based on what you could currently **SELL** the item for to a willing buyer, as in the newspaper, **NOT** the amount you paid for the item or what it would cost to replace it.

Item	Value	Item	Value
Stove	\$ _____	Clothing	\$ _____
Refrigerator	\$ _____	Jewelry	\$ _____
Freezer	\$ _____	Books	\$ _____
Washer	\$ _____	Paintings/ Art Objects	\$ _____
Dryer	\$ _____	Stamp Collection	\$ _____
Small Kitchen Appliances	\$ _____	Coin Collection	\$ _____
Kitchen Table and Chairs	\$ _____	Animals (List each)	\$ _____
Silverware and Dishes	\$ _____	Firearms	
Living Room Furniture	\$ _____	Model _____	\$ _____
Dining Room Furniture	\$ _____	Model _____	\$ _____
Den Furniture	\$ _____	Model _____	\$ _____
Master Bedroom Furniture	\$ _____	Power Tools	\$ _____
Children's Bedroom Furniture	\$ _____	Carpentry Tools	\$ _____
Other Bedroom Furniture	\$ _____	Lawn Tools	\$ _____
Television(s)		Vacuum Cleaner	\$ _____
Year/Brand _____	\$ _____	Computer	
Year/Brand _____	\$ _____	Year/Brand _____	\$ _____
VCR(s)		Printer	
Year/Brand _____	\$ _____	Year/Brand _____	\$ _____
Year/Brand _____	\$ _____	Other Personal Items	\$ _____
Satellite Dish	\$ _____	_____	\$ _____
Camcorder		_____	\$ _____
Year/Brand _____	\$ _____	_____	\$ _____
Radio	\$ _____	_____	\$ _____
Stereo		_____	\$ _____
Year/Brand _____	\$ _____	_____	\$ _____

IF YOU FINANCED ANY OF THE ABOVE ITEMS THROUGH THE SELLER OR LISTED ANY OF THESE ITEMS AS COLLATERAL FOR A PERSONAL LOAN, MARK THE ITEM ABOVE WITH ** AND COMPLETE THE FOLLOWING INFORMATION ON EACH DEBT. PLEASE SPECIFY THE COLLATERAL ITEMS AGAIN WHEN LISTING BELOW.

DEBTS SECURED BY PERSONAL PROPERTY (Not Real Estate or Vehicles)

1. **Name of Creditor:** _____ **Account No.:** _____
Address: _____ **Payoff Amount: \$** _____ **Interest Rate:** _____
City: _____ **State:** _____ **Zip:** _____
Whose name is on loan? _____ **Approx. Date you got loan:** _____
Collateral from the above list: _____
What was the original loan amount? _____

CHECK ONE: Did you purchase the item(s) from the creditor OR Use previously owned items for collateral

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a *collection agency or attorney*? If so list name and full address of Collector: _____
_____ **Street**
Address _____ **City** _____ **State** _____ **Zip** _____

CHECK ONE: How would you like handle this creditor's lien on this property? a. Keep and continue making payments b. Surrender the collateral c. Purchase outright for current market value (\$200 fee) d. Avoid lien on goods (\$522)

2. **Name of Creditor:** _____ **Account No.:** _____
Address: _____ **Payoff Amount: \$** _____ **Interest Rate:** _____
City: _____ **State:** _____ **Zip:** _____
Whose name is on loan? _____ **Approx. Date you got loan:** _____
Collateral from the above list: _____
What was the original loan amount? _____

CHECK ONE: Did you purchase the item(s) from the creditor OR Use previously owned items for collateral

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a *collection agency or attorney*? If so list name and full address of Collector: _____
_____ **Street**
Address _____ **City** _____ **State** _____ **Zip** _____

3. **Name of Creditor:** _____ **Account No.:** _____
Address: _____ **Payoff Amount: \$** _____ **Interest Rate:** _____
City: _____ **State:** _____ **Zip:** _____
Whose name is on loan? _____ **Approx. Date you got loan:** _____
Collateral from the above list: _____
What was the original loan amount? _____

CHECK ONE: Did you purchase the item(s) from the creditor OR Use previously owned items for collateral

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a *collection agency or attorney*? If so list name and full address of Collector: _____
_____ **Street Address** _____ **City** _____ **State** _____ **Zip** _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a *collection agency or attorney*? If so list name and full address of Collector: _____
_____ **Street Address** _____ **City** _____ **State** _____ **Zip** _____

SECURITY DEPOSITS:

1. Landlord: Name: _____ Amount Deposited: \$ _____
Address: _____
2. Electric Company: _____ Amount Deposited: \$ _____
Address: _____
3. Phone/ Cellular Company: _____ Amount Deposited \$ _____
Address: _____

AUTOMOBILES

1. Description: _____
Year Make Model Mileage
- Lien Holder: _____ Account No. _____
- Street Address: _____ City: _____ State: _____ Zip: _____
- Who's name is it in?: _____ When did you buy the car? _____ 10 Day Payoff Amount: _____

Is there a Co-Debtor? If so, list Name & Address: _____

(other than wife or husband if filing jointly)

RETAIL NADA Book Value of Car (from dealer, bank or internet) \$ _____ -10% = \$ _____

Do you want to: Keep Making Payments Surrender the Car Pay Current Cash Value Car is paid for

2. Description: _____
Year Make Model Mileage
- Lien Holder: _____ Account No. _____
- Street Address: _____ City: _____ State: _____ Zip: _____
- Who's name is it in?: _____ When did you buy the car? _____ 10 Day Payoff Amount: _____

Is there a Co-Debtor? If so, list Name & Address: _____

(other than wife or husband if filing jointly)

RETAIL NADA Book Value of Car (from dealer, bank or internet) \$ _____ -10% = \$ _____

Do you want to: Keep Making Payments Surrender the Car Pay Current Cash Value Car is paid for

3. Description: _____
Year Make Model Mileage
- Lien Holder: _____ Account No. _____
- Street Address _____ City _____ State _____ Zip _____
- Who's name is it in?: _____ When did you buy the car? _____ 10 Day Payoff Amount: _____

Is there a Co-Debtor? If so, list Name & Address: _____

RETAIL NADA Book Value of Car (from dealer, bank or internet) \$ _____ -10% = \$ _____

Do you want to: Keep Making Payments Surrender the Car Pay Current Cash Value Car is paid for

BOATS, MOTORCYCLES, TRAILERS, ETC.

Description: _____
Type Year Make Model Mileage (if applicable)

Lien Holder: _____
Name Loan Account Number
Street Address: _____ City: _____ State: _____ Zip: _____

Is there a Co-Debtor? If so, list Name & Address: _____

Who's name is it in?: _____ When did you buy the item? _____ 10 Day Payoff Amount: _____

Retail Book Value of Item (from dealer, bank or internet) \$ _____ Source _____

Do you want to: Keep Making Payments Surrender the Item Pay Current Cash Value Item is Paid for

PRIORITY DEBTS (In most cases, these debts will have to be paid back)

1. Student Loans.

Name of Lender: _____ Account No.: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Balance Owed: \$ _____ Are these loans Government Subsidized? Yes _____ No _____

Whose name are the loans in? _____

2. Unpaid Alimony or Child Support

Name of recipient: _____ Which spouse is the payor? _____

Street Address: _____ City: _____ State: _____ Zip: _____

Where are payments sent to: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Names and ages of children entitled to support: _____

Amount of past due arrearage: \$ _____ Amount of monthly payment: \$ _____

Name and address of Court: _____ Case No. _____

3. Unpaid Past Due Taxes

Have you filed taxes for each of the last 10 years? _____ If no, what years are unfiled? _____

a. Federal Taxes

Amount owed \$ _____ For what year(s)? _____ Type of Tax _____

Did you file a return that year? Yes _____ No _____ Whose name is the bill in? _____

Has a lien been filed by the IRS? Yes _____ No _____ If yes, please provide a copy of tax lien or levy.

Amount owed \$ _____ For what year(s)? _____ Type of Tax _____

Did you file a return that year? Yes _____ No _____ Whose name is the bill in? _____

Has a lien been filed by the IRS? Yes _____ No _____ If yes, please provide a copy of tax lien or levy.

b. North Carolina State Taxes or (_____) State Taxes

Address of Taxing Authority: _____

Amount owed \$ _____ For what year(s)? _____ Type of Tax _____

Did you file a return that year? Yes _____ No _____ Whose name is the bill in? _____

Amount owed \$ _____ For what year(s)? _____ Type of Tax _____

Did you file a return that year? Yes _____ No _____ Whose name is the bill in? _____

c. County Taxes

Name of County Tax Assessor: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Amount owed \$ _____ For what year(s)? _____ Whose name is the bill in? _____

Account Number: _____ What property is the tax for? _____
(Real Estate, Vehicle, Other)

UNSECURED DEBTS

(Credit Cards, Personal Loans (without collateral), Medical Bills, etc.)

IF YOU HAVE ADDITIONAL UNSECURED DEBTS, PLEASE MAKE COPIES OF THIS PAGE INCLUDING ALL INFORMATION BELOW, OR WE WILL GIVE YOU ADDITIONAL SHEETS

****Use Correspondence or Customer Service Addresses Only, not payment addresses ****

1. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? _____ **\$** _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

2. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? _____ **\$** _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

3. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? _____ **\$** _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

4. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? _____ **\$** _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

5. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

6. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

7. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

8. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

9. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

10. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

11. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

12. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

13. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of **co-debtor:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

14. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

15. **Name of Creditor:** _____ **Account No.:** _____

Address: _____ **Payoff Amount: \$** _____

City: _____ **State:** _____ **Zip:** _____

Whose name is on loan? _____ **Approx. Date you got loan/card:** _____

Type of Debt: _____ **Do you dispute the debt? Yes** _____ **No** _____

Have you taken a cash advance in the last 60 days? If yes, what date and for how much? \$ _____

Has anyone co-signed the loan with you? If yes, name of co-debtor: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Has the debt been assigned to a collection agency or attorney? If so list name and address:

Name of Collector: _____

Street Address _____ **City** _____ **State** _____ **Zip** _____

UNEXPIRED LEASES AND CONTRACTS

If you wish to discontinue/reject this lease or contract, it must also be listed in the Unsecured Debt pages.

List any leases or contracts you are a party to currently. Include verbal residential, car, cell phone, business, service contracts.

1. **Nature of Contract:** _____ **Date Contract/ Lease Expires:** _____

Name of other Party: _____

Street Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Are you current in your lease/contract payments? _____ **Do you want to keep the lease/contract?** _____

2. **Nature of Contract:** _____ **Date Contract/ Lease Expires:** _____

Name of other Party: _____

Street Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Are you current in your lease/contract payments? _____ **Do you want to keep the lease/contract?** _____

CURRENT INCOME

Marital Status: Married Single Divorced Separated Widowed

List all dependents (that are claimed on your taxes) of you and your spouse, their ages, and their relationship to you:

Full Name	Age	Relationship
-----------	-----	--------------

Part A. Debtor's Income (Husband, if joint) (please figure MONTHLY amounts)

1. Occupation: _____ Name of Employer: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

2. How long have you been employed there? _____

3. Gross amount of <u>monthly</u> pay, <i>before</i> deductions are taken out:	\$ _____
Alimony	\$ _____
Child Support	\$ _____
Government Assistance	\$ _____
Pension or retirement income	\$ _____
Social Security Income	\$ _____
Other monthly income _____	\$ _____

4. DEDUCTIONS FROM PAYCHECK: Total monthly taxes (all)	\$ _____
Monthly Insurance	\$ _____
Union Dues	\$ _____
Retirement Contribution	\$ _____
Retirement Loan	\$ _____
Other _____	\$ _____

Net amount of monthly pay , after deductions are taken out: \$ _____

Part B. Spouse's Income (Wife, if joint or if you use joint bank accounts) (please figure MONTHLY amounts)

1. Occupation: _____ Name of Employer: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

2. How long have you been employed there? _____

3. Gross amount of <u>monthly</u> pay, <i>before</i> deductions are taken out:	\$ _____
Alimony	\$ _____
Child Support	\$ _____
Government Assistance	\$ _____
Pension or retirement income	\$ _____
Social Security Income	\$ _____
Other monthly income _____	\$ _____

4. DEDUCTIONS FROM PAYCHECK: Total monthly taxes (all)	\$ _____
Monthly Insurance	\$ _____
Union Dues	\$ _____
Retirement Contribution	\$ _____
Retirement Loan	\$ _____
Other _____	\$ _____

Net amount of monthly pay , after deductions are taken out: \$ _____

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

EXPENSES AFTER FILING

Do you and your spouse maintain separate households? _____ If so, fill out separate page for **each** spouse.

PLEASE SHOW **MONTHLY** AMOUNTS OF EXPENSES BELOW:

- | | | |
|--|--|--------------|
| 1. Rent or home mortgage (include lot rent for mobile home) | | 1. \$ _____ |
| Are real estate taxes included? Yes _____ No _____ | | |
| Is property insurance included? Yes _____ No _____ | | |
| 2. Electricity and heating | | 2. \$ _____ |
| 3. Water and sewer | | 3. \$ _____ |
| 4. Telephone service and long distance charges | | 4. \$ _____ |
| 5. Cable Television Service | | 5. \$ _____ |
| 6. Home maintenance (repairs and upkeep) | | 6. \$ _____ |
| 7. Food | | 7. \$ _____ |
| 8. Clothing | | 8. \$ _____ |
| 9. Laundry and Dry Cleaning | | 9. \$ _____ |
| 10. Medical and Dental Expenses | | 10. \$ _____ |
| 11. Transportation Expenses (gasoline, car repairs, etc.) | | 11. \$ _____ |
| 12. Recreation, entertainment, newspapers, magazines, etc | | 12. \$ _____ |
| 13. Charitable Contributions | | 13. \$ _____ |
| 14. Insurance (<i>not deducted from paycheck or included in mortgage</i>) | | |
| Homeowners or Renters | | 14. \$ _____ |
| Life | | \$ _____ |
| Health | | \$ _____ |
| Automobile | | \$ _____ |
| Other Insurance _____ | | \$ _____ |
| 15. Taxes (<i>not deducted from paycheck or included in mortgage</i>) | | 15. \$ _____ |
| Real Estate: _____ | | \$ _____ |
| Self Employment: _____ | | \$ _____ |
| Vehicle: _____ | | \$ _____ |
| 16. Installments payments for car, furniture, etc. after bankruptcy | | |
| Specify: _____ | | 16. \$ _____ |
| Specify: _____ | | \$ _____ |
| Specify: _____ | | \$ _____ |
| Specify: _____ | | \$ _____ |
| 17. Alimony or child support paid to others | | 17. \$ _____ |
| 18. Regular expenses from operation of business or farm
(attach detailed statement) | | 18. \$ _____ |
| 19. Childcare expenses: | | 19. \$ _____ |
| 20. Baby expenses: | | 20. \$ _____ |
| 21. School expenses: | | 21. \$ _____ |
| 22. Pet expenses: (Remember to list your Animals on page 6) | | 22. \$ _____ |
| 23. Internet expenses: | | 23. \$ _____ |
| 24. Personal care, haircuts, postage | | 24. \$ _____ |
| 25. Other expenses: | | 25. \$ _____ |

ADD UP YOUR TOTAL MONTHLY EXPENSES \$ _____

TOTAL NET MONTHLY INCOME FROM **PREVIOUS** PAGE \$ _____

AMOUNT OF DISPOSABLE INCOME \$ _____

(Subtract Monthly Income from Monthly Expenses)