

DOCUMENTS WE MUST HAVE BEFORE YOUR BANKRUPTCY CAN BE FILED:

ALL CLIENTS WILL NEED TO PROVIDE:

- Fully completed & signed **Follow-Up Financial Questionnaire** - AND - fully completed & signed **Debt Sheets** with complete address and account # for EVERY creditor listed
- COPIES** of your Federal and State income tax returns (**INCLUDING W2's**) for 2016, 2017, and 2018. (Please re-sign them in blue ink.)
- COPIES** of pay stubs from all jobs (full & part-time) for past eight (8) months and/or proof of other income such as child support, pension disbursements, etc.
NOTE: In addition, you are REQUIRED to provide proof of income, from all sources, up to day your case is filed.
NOTE: If married, but filing "single", must provide for non-filing spouse
NOTE: If you are self-employed, bring a current profit-and-loss statement for the past year
- COPIES** of statements for past three (3) months from your credit union, bank, stock broker, or any other financial institution with whom you have an acct
NOTE: In addition, you are REQUIRED to provide these statements, from all sources, up to day your case is filed.
- COPY** of your Driver's License and **COPY** of your Soc Sec Card (plan to bring your originals to your Court hearing)
- PLEASE PROVIDE** copy of **CREDIT COUNSELING CERTIFICATE**, once completed

IF YOU OWN AN AUTOMOBILE OUTRIGHT (NO LIEN), PLEASE PROVIDE A COPY OF THE AUTO TITLE; HOWEVER, IF YOU ARE PURCHASING AN AUTOMOBILE, PLEASE PROVIDE:

- COPY** of the financing agreement for any vehicle you are purchasing along with proof of auto insurance

IF YOU OWN ANY TYPE OF REAL ESTATE (NO MORTGAGE OR LIEN), PLEASE PROVIDE A COPY OF THE DEED OR MORTGAGE; HOWEVER, IF YOU ARE PURCHASING ANY TYPE OF REAL ESTATE, PLEASE PROVIDE:

- COPY** of the monthly mortgage statement or payment coupon, deed, and actual mortgage documents along with proof of homeowner's insurance
- COPY** of comparative market analysis and real estate tax assessments of all parcels of real estate in which you are listed on tax records or deeds
NOTE: Any appraisals or CMAs done in the past two (2) years are acceptable

IF YOU ARE CURRENTLY BEING SUED, PLEASE PROVIDE:

- COPY** of any lawsuit/court document (Be sure to list on debt sheets with all info!)

IF YOU HAVE BEEN DIVORCED AND/OR PAY CHILD SUPPORT, PLEASE PROVIDE:

- COPY** of your divorce decree, or any other Court Order requiring you to pay child support, alimony, and/or maintenance

Have you filed for bankruptcy in the last eight (8) years?

check (✓) No Yes

If Yes: State Name _____ Court District _____ Date Filed: _____
Case Number: _____ **ATTORNEY USE ONLY:** Is Motion to Extend Automatic Stay needed?)

Are any bankruptcy cases currently pending against you, your business, your spouse, or your spouse's business?

check (✓) No Yes

If Yes: State Name _____ Court District _____ Date Filed: _____
Case Number: _____ **ATTORNEY USE ONLY:** Is Motion to Extend Automatic Stay needed?)

Do you rent your residence? **check (✓)** No Yes

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? **check (✓)** No Yes

If Yes: State Name _____ Court District _____ Date Filed: _____
Case Number: _____ **ATTORNEY USE ONLY:** Is Motion to Extend Automatic Stay needed?)

If Yes, we will need to fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with the bankruptcy petition.

Are you a sole proprietor of any full-or part-time business?

check (✓) No Yes

(NOTE: A sole proprietor is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.)

If **Yes**, please provide name and location of business:

If **Yes**, please check (✓) what type of business it is:

- Health Care Business Single Asset Real Estate
 Stockbroker Commodity Broker
 None of the Above _____

Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? **check (✓)** No Yes

Or do you own any property that needs immediate attention, such as livestock that needs fed or a building that needs immediate repair? **check (✓)** No Yes

If **Yes**, please advise what the hazard is, why attention is needed, and where it is located:

REAL ESTATE INFORMATION:

1. Are you buying any real estate or is your name on any real estate?

check (✓) No Yes

(List all real estate, including timeshares)

If **Yes**: **Property (1)** Street Address: _____

City, State, and Zip: _____

(**ATTORNEY USE ONLY**: Nature of Debtor's Interest: _____)

Description of Property: # Bedrooms_____, # Baths_____, # Floors_____, Date Purchased: _____

Purchase Price: \$_____ Amount Owed: \$_____ Current **Value**: \$_____

Please check (✓) what type of property this is (check one):

- | | |
|---|--|
| <input type="checkbox"/> Single-family home | <input type="checkbox"/> Duplex or multi-unit building |
| <input type="checkbox"/> Condominium or cooperative | <input type="checkbox"/> Manufactured or mobile home |
| <input type="checkbox"/> Land | <input type="checkbox"/> Investment property |
| <input type="checkbox"/> Timeshare | <input type="checkbox"/> Other _____ |

Please check (✓) who has interest in this property (check one):

- | | |
|--|---|
| <input type="checkbox"/> Debtor 1 only | <input type="checkbox"/> Debtor 2 only |
| <input type="checkbox"/> Debtor 1 and Debtor 2 Jointly | <input type="checkbox"/> One of the Debtors and another party _____ |

If **Yes**: **Property (2)** Street Address: _____

City, State, and Zip: _____

(**ATTORNEY USE ONLY**: Nature of Debtor's Interest: _____)

Description of Property: # Bedrooms_____, # Baths_____, # Floors_____, Date Purchased: _____

Purchase Price: \$_____ Amount Owed: \$_____ Current **Value**: \$_____

Please check (✓) what type of property this is (check one):

- | | |
|---|--|
| <input type="checkbox"/> Single-family home | <input type="checkbox"/> Duplex or multi-unit building |
| <input type="checkbox"/> Condominium or cooperative | <input type="checkbox"/> Manufactured or mobile home |
| <input type="checkbox"/> Land | <input type="checkbox"/> Investment property |
| <input type="checkbox"/> Timeshare | <input type="checkbox"/> Other _____ |

Please check (✓) who has interest in this property (check one):

- | | |
|--|---|
| <input type="checkbox"/> Debtor 1 only | <input type="checkbox"/> Debtor 2 only |
| <input type="checkbox"/> Debtor 1 and Debtor 2 Jointly | <input type="checkbox"/> One of the Debtors and another party _____ |

2. Atty Use Only:
Total for real estate \$ _____

PERSONAL PROPERTY INFORMATION (VEHICLES):

3. Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? This includes autos, trucks, motorcycles, auto leases, and any vehicles that you own that someone else drives. **check (√)** No Yes

If **Yes: Vehicle (1)** Make _____ Model _____ Year _____
Approx. Mileage _____ Other Info. _____
Balance Owed: \$ _____ Current **Value:** \$ _____

Please check (√) who has interest in this property (check one):

Debtor 1 only Debtor 2 only
 Debtor 1 and Debtor 2 Jointly One of the Debtors and another party _____

If **Yes: Vehicle (2)** Make _____ Model _____ Year _____
Approx. Mileage _____ Other Info. _____
Balance Owed: \$ _____ Current **Value:** \$ _____

Please check (√) who has interest in this property (check one):

Debtor 1 only Debtor 2 only
 Debtor 1 and Debtor 2 Jointly One of the Debtors and another party _____

If **Yes: Vehicle (3)** Make _____ Model _____ Year _____
Approx. Mileage _____ Other Info. _____
Balance Owed: \$ _____ Current **Value:** \$ _____

Please check (√) who has interest in this property (check one):

Debtor 1 only Debtor 2 only
 Debtor 1 and Debtor 2 Jointly One of the Debtors and another party _____

4. Do you own, lease, or have legal or equitable interest in any watercraft, aircraft, motorhome, ATV and other recreational vehicles? This includes boats, trailers, motors, watercraft and fishing boats. **check (√)** No Yes

If **Yes**, list info: Make _____ Model _____ Year _____
Approx. Mileage _____ Other Info. _____
Balance Owed: \$ _____ Current **Value:** \$ _____

Please check (√) who has interest in this property (check one):

Debtor 1 only Debtor 2 only
 Debtor 1 and Debtor 2 Jointly One of the Debtors and another party _____

5. Atty Use Only:
Total for autos \$ _____

PERSONAL PROPERTY INFORMATION (PERSONAL & HOUSEHOLD):

Do you own or have any legal or equitable interest in any of the following items?
Please **check (√)** No or Yes:

6. Household Goods and Furnishings

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

Value: \$ _____

7. Electronics

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

Value: \$ _____

8. Collectibles of Value

Examples: Antiques, figurines, paintings, prints, artwork, books, pictures, art objects, stamp collection, coin collection, baseball card collection, any collection, memorabilia, collectibles

No Yes If **Yes**, please give brief description of items and current value of the portion you own

Value: \$ _____

9. Equipment for Sports and Hobbies

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

Value: \$ _____

PERSONAL PROPERTY INFORMATION (PERSONAL & HOUSEHOLD) CONTINUED:

10. Firearms

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own
_____ **Value: \$**_____

11. Clothes

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value: \$**_____

12. Jewelry

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value: \$**_____

13. Non-Farm Animals

Examples: Dogs, cats, birds, horses

No Yes If **Yes**, please give brief description of items and current value of the portion you own
_____ **Value: \$**_____

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

No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value: \$**_____

15. Atty Use Only:
Total for personal items \$

PERSONAL PROPERTY INFORMATION (FINANCIAL ASSETS):

Do you own or have any legal or equitable interest in any of the following items?
Please **check (√)** No or Yes:

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 If **Yes**, please list amount:

Cash: \$ _____

17. Deposits of Money

Examples: Checking, savings, debit card accounts, or other financial institutions, 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 If **Yes**, please give details below:

Name of Institution or Bank	Type of Account	Last 4 digits of Account #	Balance in Account
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

18. Bonds, Mutual Funds, or Publicly Traded Stocks

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

No Yes If **Yes**, please give details below:

Name of Institution or Issuer	Type of Account	Last 4 digits of Account #	Balance in Account
_____	_____	_____	\$ _____

19. Non-Publicly Traded Stock and Interests in Incorporated and Unincorporated Businesses, Including an Interest in an LLC, Partnership or Joint Venture

No Yes If **Yes**, please give details below:

Name of Entity	Type of Stock	% of ownership	Value of Stock
_____	_____	_____	\$ _____

PERSONAL PROPERTY INFORMATION (FINANCIAL ASSETS) CONTINUED:

Do you own or have any legal or equitable interest in any of the following items?
Please **check** (✓) No or Yes:

20. Government and Corporate bonds and other Negotiable & Non-Negotiable Instruments

Examples: Negotiable include Personal checks, cashier's checks, and money orders. Non-negotiable include instruments that you cannot transfer to someone by signing or delivering them

No Yes If **Yes**, please give details below:

Name of Issuer: _____ **Value:** \$ _____

21. Retirement or Pension Accounts

Examples: This would include 401(k), pension plan, IRA, retirement account, Keogh

No Yes If **Yes**, please give details below **AND bring in documentation for each of these accounts:**

Type of Account	Institution Name	Debtor Name on Acct	Balance in Account
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

22. Security Deposits and Prepayments

No Yes If **Yes**, please give details below:

Electric Co	Amount of Deposit: \$ _____	Heating Oil Co	Amount of Deposit: \$ _____
Gas Co	Amount of Deposit: \$ _____	Water Co	Amount of Deposit: \$ _____
Rent Deposit	Amount of Deposit: \$ _____	Telephone Co	Amount of Deposit: \$ _____
Other _____			Amount of Deposit: \$ _____

23. Annuities

No Yes If **Yes**, please give details below:

Name of Issuer: _____ **Value:** \$ _____

24. Interests in Education IRA or a Qualified State Tuition Program

No Yes If **Yes**, please give details below:

Name of Issuer: _____ **Value:** \$ _____

PERSONAL PROPERTY INFORMATION (FINANCIAL ASSETS) CONTINUED:

Do you own or have any legal or equitable interest in any of the following items?
Please **check** (✓) No or Yes:

25. Trusts, Equitable or Future Interests in Property

No Yes If **Yes**, please give details below:

_____ **Value: \$**_____

26. Patents Copyrights, Trademarks, or other Intellectual Property

No Yes If **Yes**, please give details below:

_____ **Value: \$**_____

27. Licenses, Franchises, or other General Intangibles

No Yes If **Yes**, please give details below:

_____ **Value: \$**_____

PERSONAL PROPERTY INFORMATION (MONEY OWED TO YOU):

28. Are you owed any Tax Refunds?

No Yes If **Yes**, please give details below:

Tax Year: _____ Return Filed?: _____ **Federal Refund: \$**_____

Tax Year: _____ Return Filed?: _____ **State Refund: \$**_____

29. Are you owed any past-due alimony, support, maintenance, etc.?

No Yes If **Yes**, please give details below:

_____ **Amount: \$**_____

PERSONAL PROPERTY INFORMATION (MONEY OWED TO YOU) CONTINUED:

30. Are you owed any other money such as unpaid wages, disability benefits, vacation pay, sick pay, unpaid loans made to someone else, etc.?

No Yes If **Yes**, please give details below and include Company Name, Beneficiary and Surrender Value:

_____ **Amount: \$** _____

31. Do you have any life insurance policies?

No Yes If **Yes**, please give details below **AND bring in documentation for each of these policies:**

_____ **Amount: \$** _____

32. Do you have any interest in property that is due you from someone who has died?

No Yes If **Yes**, please give details below:

_____ **Amount: \$** _____

33. Do you have any claims against 3rd 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 If **Yes**, please give details below:

_____ **Amount: \$** _____

34. Do you have any other contingent or unliquidated claims of every nature, including counterclaims?

Example: Can you sue anyone for any reason?

No Yes If **Yes**, please give details below:

_____ **Amount: \$** _____

35. Do you have any financial assets you did not already list?

No Yes If **Yes**, please give details below:

_____ **Amount: \$** _____

36. Atty Use Only:
Total for financial \$ _____

BUSINESS INFORMATION:

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

No If **No**, **SKIP** this page and go to question #46

Yes If **Yes**, **FILL** out questions #38 through #44

38. Do you have any accounts receivable or commissions you already earned?

No Yes If **Yes**, please list amount: **Amount: \$**_____

39. Do you have any office equipment, furnishings or supplies?

No Yes If **Yes**, please list details and value:

_____ **Value: \$**_____

40. Do you have any machinery, fixtures, tools of the trade, etc.?

No Yes If **Yes**, please list details and value:

_____ **Value: \$**_____

41. Do you have any inventory?

No Yes If **Yes**, please list details and value:

_____ **Value: \$**_____

42. Do you have any interests in partnerships or joint ventures?

No Yes If **Yes**, please list details and value:

_____ **Value: \$**_____

43. Do you have any customer lists, mailing lists, etc.?

No Yes If **Yes**, please list value: **Value: \$**_____

44. Do you have any other business-related property you did not already list?

No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value: \$**_____

45. Atty Use Only:
Total for business \$

FARM AND FISHING INFORMATION:

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

- No If **No**, go to question #53
- Yes If **Yes**, FILL out questions #47 through #51

47. Do you have any farm animals, live stock, poultry, farm-raised fish?

- No Yes If **Yes**, please list details and value:

_____ **Value:** \$ _____

48. Do you have any crops – either growing or harvested?

- No Yes If **Yes**, please list value:

Value: \$ _____

49. Do you have any farm or fishing equipment, machinery, fixtures, tools of the trade, etc.?

- No Yes If **Yes**, please list details and value:

_____ **Value:** \$ _____

50. Do you have any farm or fishing supplies, chemicals or feed?

- No Yes If **Yes**, please list details and value:

_____ **Value:** \$ _____

51. Do you have any other farm- or fishing-related property you did not already list?

- No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value:** \$ _____

52. Atty Use Only:
Total for farm/fish \$ _____

PERSONAL PROPERTY INFORMATION (MISCELLANEOUS):

53. Do you have any other personal property you did not already list?

- No Yes If **Yes**, please give brief description of items and current value of the portion you own

_____ **Value:** \$ _____

54. Atty Use Only:
Total for misc. \$ _____

TAXES OWED:

Do you owe back taxes to the **Internal Revenue Service?**

check (√) No Yes If **Yes**, MAKE SURE to list on debt sheets & add'l info needed:

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IRS: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IRS: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IRS: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IRS: _____

If you need to know the date your tax return was filed, please call: 1-800-829-1040 (7am-10pm)

Do you owe back taxes to the **Indiana Department of Revenue?**

check (√) No Yes If **Yes**, MAKE SURE to list on debt sheets & add'l info needed:

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IDR: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IDR: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IDR: _____

Year owed for: _____ Amt: \$_____ Date this tax return was filed with IDR: _____

If you need to know the date your tax return was filed, please call: 1-317-232-2289

CONTRACTS AND LEASES:

Do you have any unexpired contracts or leases?

Examples: auto leases, apartment or house club membership, rent-to-own, storage spaces, musical equipment rental, land contracts, etc.

check (√) No Yes If **Yes**, MAKE SURE to list on debt sheets & add'l info needed:

Name & Address of who you contract or lease from: _____

Type of contract or lease: _____ Assume or Reject: _____

CO-DEBTORS:

Has anyone co-signed for you? (including an ex-spouse or spouse who is not filing)

check (√) No Yes If **Yes**, please list details below:

Name of person WHO CO-SIGNED FOR YOU and list their address: _____

What debt did they co-sign for (name of creditor)? _____

Have you co-signed for anyone? (including an ex-spouse or spouse who is not filing)

check (√) No Yes If **Yes**, please list details below:

Name of person YOU CO-SIGNED FOR and list their address: _____

What debt did you co-sign for (name of creditor)? _____

CURRENT INCOME (EMPLOYER INFORMATION):

DEBTOR 1

Job Description: _____

How long Employed: _____

Employer Name: _____

Complete Address of Employer: _____

If different from above, need Payroll Name and Address:

Payroll Name: _____

Payroll Address: _____

Payroll Phone: _____ Fax: _____

How often paid? (weekly, biweekly, etc.) _____

Do you have a part-time job? If so, please provide:

Part-time Job Description: _____

How long Employed: _____

Employer Name: _____

Complete Address of Employer: _____

DEBTOR 2

Job Description: _____

How long Employed: _____

Employer Name: _____

Complete Address of Employer: _____

If different from above, need Payroll Name and Address:

Payroll Name: _____

Payroll Address: _____

Payroll Phone: _____ Fax: _____

How often paid? (weekly, biweekly, etc.) _____

Do you have a part-time job? If so, please provide:

Part-time Job Description: _____

How long Employed: _____

Employer Name: _____

Complete Address of Employer: _____

*****DO NOT FILL OUT THIS PAGE - GO ON TO PAGE 17 *****
*****THIS PAGE WILL BE COMPLETED AT YOUR FOLLOW-UP APPOINTMENT*****

CURRENT INCOME (PAYCHECK INFORMATION):

	DEBTOR 1	DEBTOR 2
Income: (Estimate of average monthly income)		
Current monthly gross wages, salary, commissions:	\$ _____	\$ _____
Estimated Overtime:	\$ _____	\$ _____
<hr style="border-top: 1px dashed black;"/>		
SUBTOTAL:	\$ _____	\$ _____
Less Payroll Deductions		
Tax, Medicare, and Social Security:	\$ _____	\$ _____
Mandatory contributions for retirement plans:	\$ _____	\$ _____
Voluntary contributions for retirement plans:	\$ _____	\$ _____
Required repayments of retirement fund loans:	\$ _____	\$ _____
Insurance:	\$ _____	\$ _____
Domestic support obligations:	\$ _____	\$ _____
Union dues:	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
<hr style="border-top: 1px dashed black;"/>		
SUBTOTAL OF PAYROLL DEDUCTIONS:	\$ _____	\$ _____
<hr style="border-top: 1px dashed black;"/>		
TOTAL NET MONTHLY TAKE HOME PAY:	\$ _____	\$ _____
Net income from rental property:	\$ _____	\$ _____
Net income from operating a business, profession, or farm:	\$ _____	\$ _____
Interest and dividends:	\$ _____	\$ _____
Alimony, maintenance, support payments:	\$ _____	\$ _____
Unemployment compensation:	\$ _____	\$ _____
Social security:	\$ _____	\$ _____
Other government assistance received _____:	\$ _____	\$ _____
Pension or retirement income _____:	\$ _____	\$ _____
Other monthly income _____:	\$ _____	\$ _____
<hr style="border-top: 1px dashed black;"/>		
TOTAL MONTHLY INCOME:	\$ _____	\$ _____
TOTAL COMBINED MONTHLY INCOME: \$ _____		

Description of increase/decrease of more than 10%:

CURRENT EXPENSES:

1. If this is a JOINT case and you live apart, this is a reminder that both Debtor 1 and Debtor 2 will be required to fill out separate CURRENT EXPENSES forms.

2. Please list all dependents of Debtor 1 and Debtor 2 (whether or not they live with you):

First Name of Dependent & Relationship (son, daughter, etc.)	Age	Live with you?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

No Yes If Yes, please list details: _____

Please complete the following by estimating the **average monthly expenses** of the Debtor and Debtor’s family. Make sure you list as a monthly rate.

4. 1st Mortgage Payment or Rent Payment: \$ _____

If not included in the above mortgage or rent payment, please list monthly amount paid for:

4a. Real Estate Taxes: \$ _____

4b. Homeowner or Renter Insurance: \$ _____

4c. Home Maintenance, Repair, and Upkeep: \$ _____

4d. Homeowner Assoc. or Condo Dues: \$ _____

5. 2nd Mortgage Payment or Home Equity Loan: \$ _____

6. Utilities:

6a. Electric, Heat, Natural Gas: \$ _____

6b. Water, Sewer, Garbage Collection: \$ _____

6c. Telephone, Cell, Internet, Satellite, Cable: \$ _____

6d. Other _____: \$ _____

7. Food and Housekeeping Supplies: \$ _____

8. Childcare and Children’s Education Costs: \$ _____

9. Clothing, Laundry, Dry Cleaning: \$ _____

10. Personal Care Products and Services: \$ _____

11. Medical and Dental Expenses: \$ _____

CURRENT EXPENSES CONTINUED:

12. Transportation (include gas, maintenance, bus fare): \$ _____

13. Entertainment, Newspapers, Books, Magazines, etc.: \$ _____

14. Charitable Contributions or Religious Donations: \$ _____

15. Insurance:

15a. **Life Insurance** (not deducted from paycheck): \$ _____

15b. **Health Insurance**(not deducted from paycheck): \$ _____

15c. **Vehicle Insurance:** \$ _____

15d. **Other** _____: \$ _____

16. Taxes (not deducted from paycheck): \$ _____

17. Installment or Lease Payments:

17a. **Car Payment or Lease Payment for Vehicle 1:** \$ _____

17b. **Car Payment or Lease Payment for Vehicle 2:** \$ _____

17c. **Other** _____: \$ _____

17d. **Other** _____: \$ _____

18. Alimony or Support (not deducted from paycheck): \$ _____

19. Other payments you make to support others who do not live with you:

Specify _____: \$ _____

Specify _____: \$ _____

20. Other real property expenses if you have more than 1 piece of real estate, including mortgage, HOA, taxes, etc.:

Specify _____: \$ _____

Specify _____: \$ _____

21. ANY Other expense not already included:

Specify _____: \$ _____

Specify _____: \$ _____

Specify _____: \$ _____

(TOTALS BELOW WILL BE FIGURED **BY THE ATTORNEY** AT YOUR FOLLOW-UP APPOINTMENT)

TOTAL INCOME: \$ _____

TOTAL EXPENSES: \$ _____

EXCESS INCOME: \$ _____

PLAN PAYMENT: \$ _____

Description of increase/decrease of more than 10%:

STATEMENT OF FINANCIAL AFFAIRS:

1. What is your current marital status? _____
2. During the last 3 years, have you lived anywhere other than where you live now? check (✓) No Yes If **Yes**, give details below:

Debtor 1: Prior Address _____
 Dates lived there _____ to _____

Debtor 1: Prior Address _____
 Dates lived there _____ to _____

Debtor 2: Prior Address _____
 Dates lived there _____ to _____

Debtor 2: Prior Address _____
 Dates lived there _____ to _____

3. Within the last 8 years, has Debtor 1 or Debtor 2 ever lived in a community property state such as Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin?
check (✓) No Yes If **Yes**, which state and when? _____

4. Please list Annual Gross Income so far this year, and for the past three (3) years. Include all sources of that income (all employers, self-employment, etc.)

DEBTOR 1

2019 ytd \$ _____ Name of employers: _____

2018 \$ _____ Name of employers: _____

2017 \$ _____ Name of employers: _____

2016 \$ _____ Name of employers: _____

DEBTOR 2

2019 ytd \$ _____ Name of employers: _____

2018 \$ _____ Name of employers: _____

2017 \$ _____ Name of employers: _____

2016 \$ _____ Name of employers: _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

5. Have you received any income so far this year, or in last three (3) years, other than from your job? (Such as, Soc Sec, Disability, Retirement, Child Supp, etc.)

check (√) No Yes If **Yes**, please list details below:

circle **Yes or No** If yes, complete below:

DEBTOR 1

2019 ytd \$ _____ Source of income: _____
2018 \$ _____ Source of income: _____
2017 \$ _____ Source of income: _____
2016 \$ _____ Source of income: _____

DEBTOR 2

2019 ytd \$ _____ Source of income: _____
2018 \$ _____ Source of income: _____
2017 \$ _____ Source of income: _____
2016 \$ _____ Source of income: _____

6. Have you made payments to any of your creditors totaling \$600 (or more) within the last 90 days?

check (√) No Yes If **Yes**, please list:

Creditor Name: _____ Total Amt Paid: _____ Balance Due: _____
Date Paid: _____ What was this payment for? _____

Creditor Name: _____ Total Amt Paid: _____ Balance Due: _____
Date Paid: _____ What was this payment for? _____

Creditor Name: _____ Total Amt Paid: _____ Balance Due: _____
Date Paid: _____ What was this payment for? _____

Creditor Name: _____ Total Amt Paid: _____ Balance Due: _____
Date Paid: _____ What was this payment for? _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

7. Within 1 year before filing, did you make a payment on a debt you owed anyone who was an insider? check (✓) No Yes If **Yes**, please list:

Insiders include your relatives, partners, etc. Also, include payments for domestic and support obligations such as child support and alimony. (NOTE to Attorney: If Debtor pays child support fill out DSO)

Insider's Name _____ Total Amt Paid _____ Balance Due _____
Date Paid _____ What was this payment for? _____

Insider's Name _____ Total Amt Paid _____ Balance Due _____
Date Paid _____ What was this payment for? _____

If you have a **child support obligation**, please provide the name, address and phone number of the child support recipient(s):

8. Within 1 year before filing, did you make a payment or transfer any property of a debt that benefited an insider? check (✓) No Yes If **Yes**, please list:

Insider's Name: _____ Total Amt Paid: _____ Balance Due: _____
Date Paid: _____ What was this payment for? _____

9. Within 1 year before filing, were you a party in any lawsuit, court action, or administrative proceeding? check (✓) No Yes If **Yes**, please list:

List all such matters, including personal injury claims, small claims actions, collection lawsuits, paternity actions, custody modifications or contract disputes.

Creditor Who Sued You _____
Cause # _____ Nature of Proceeding _____
Court _____ Status _____

Creditor Who Sued You _____
Cause # _____ Nature of Proceeding _____
Court _____ Status _____

Creditor Who Sued You _____
Cause # _____ Nature of Proceeding _____
Court _____ Status _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

10. Within 1 year before filing, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

check (✓) No Yes If **Yes**, please list:

Creditor Name _____

Date _____ Amount _____

Details _____

Creditor Name _____

Date _____ Amount _____

Details _____

11. Within 1 year before filing, has any bank or financial institution taken money from your account to pay a debt (other than regular bank charges)?

check (✓) No Yes If **Yes**, please list:

Bank _____ Amount _____ Date _____

12. Within 1 year before filing, was any of your property in the possession of an assignee for the benefit of creditors, custodian or other official?

check (✓) No Yes If **Yes**, please give details:

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

check (✓) No Yes If **Yes**, please give details:

Name of Person Gift Given To _____

Date _____ Value _____

Details of Gift _____

Name of Person Gift Given To _____

Date _____ Value _____

Details of Gift _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

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

check (✓) No Yes If **Yes**, please give details:

Charity Name Given To _____

Date _____ Value _____

Details of Contribution _____

Charity Name Given To _____

Date _____ Value _____

Details of Contribution _____

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

check (✓) No Yes If **Yes**, please give details:

Details of Loss _____

Date _____ Value _____

16. Within 1 year before filing, did you pay any attorney for any legal advice regarding bankruptcy?

check (✓) No Yes If **Yes**, please give details:

Name of Payee _____

Date _____ Amount Paid _____

17. Within 1 year before filing, did you pay any credit counseling company for any legal advice regarding bankruptcy?

check (✓) No Yes If **Yes**, please give details:

Name of Payee _____

Date _____ Amount Paid _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

18. Within 2 years before filing, did you give away, sell or transfer any property to anyone?

Do not include any gifts or transfers that you have already listed.

check (✓) No Yes If **Yes**, please give details:

Name and address of Transferee _____

Date of Transfer _____ Property and FMV _____

19. Within 10 years before filing, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?

check (✓) No Yes If **Yes**, please give details:

20. Within 1 year before filing, were any financial accounts (such as checking or savings) or instruments held in your name, closed, sold, moved, or transferred?

check (✓) No Yes If **Yes**, please give details:

Name of Financial Institution _____

Last 4 digits of Account _____ Type of Account _____

Date closed, sold, moved, or transferred _____ Final Balance _____

Name of Financial Institution _____

Last 4 digits of Account _____ Type of Account _____

Date closed, sold, moved, or transferred _____ Final Balance _____

21. Do you currently have, or did you have within 1 year before filing, a safe deposit box or other depository?

check (✓) No Yes If **Yes**, please give details:

Name of Financial Institution _____

Contents of Box _____

Who has Access? _____ Still Open? _____

STATEMENT OF FINANCIAL AFFAIRS CONTINUED:

22. Do you currently have, or did you have within 1 year before filing, a storage unit?

check (✓) No Yes If **Yes**, please give details:

Name of Facility _____

Contents of Unit _____

Who has Access? _____ Still Open? _____

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

check (✓) No Yes If **Yes**, please give details:

Owner's Name _____

Location of Property _____

Description of Property _____ Value _____

I AFFIRM UNDER THE PENALTIES FOR PERJURY, THAT THE FOREGOING INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE:

Date: _____ X _____
DEBTOR 1

Date: _____ X _____
DEBTOR 2

Once you are paid in full, please bring this paperwork packet to one of our offices (no appointment needed). Office staff will review the packet and then schedule a Follow-Up appointment with the attorney.

NORTH: 6100 N. Keystone Avenue, Suite 454, Indianapolis, IN 46220 **(317)255-9915**
SOUTH: 5140 Madison Avenue, Suite 1B, Indianapolis, IN 46227 **(317)786-6113**
EAST: 1701 A North Shadeland Avenue, Indianapolis, IN 46219 **(317)870-3232**

----- **Please Do Not Fill Out Below Line** ----- **Law Office Use Only** -----

Initial: _____ Packet reviewed by office Initial: _____ Packet reviewed by attorney
Date: _____ Date: _____

Circle: Indiv Joint Indiv but Married living together Indiv but Married living apart

Circle: Ch 13 Ch 7

If Ch 7: Need intentions on secured property:

Creditor: _____ Collateral: _____ Intent: _____
Creditor: _____ Collateral: _____ Intent: _____