

## CLIENT QUESTIONNAIRE

Thank you very much for calling GINSBERG LAW OFFICES, P.C. for legal assistance relating to your debt problems. We can provide you with the most helpful and accurate advice only if we have a complete and accurate understanding of your current financial situation.

Please fill out this form as completely as possible. Please provide us with emergency phone or address contact information. If you have e-mail, please let us know - this is an excellent way for us to contact you and we can use e-mail to keep you up-to-date with legal topics of interest. There are, by the way, several free e-mail services available to you - if you want to learn more about free e-mail, please ask us.

If you don't understand a question, please ask for assistance. We ask that you list each and every financial obligation you have in the "creditor boxes." If you need more space, please use the back or photocopy the page of boxes.

Please also remember to list every creditor to whom you are obligated. This means, for example, that if you have co-signed for your nephew's car loan, that car lienholder is your creditor. Similarly, you should list debts even if you think the creditor has written off the loan or if you think that someone else may pay the bill in the future (i.e. a medical bill that may be covered by insurance).

If you have copies of your bills, please bring them with you to our office. If necessary, we can assist you in requesting a credit bureau report. We also ask that you bring a paycheck stub or provide payroll information for both you and your spouse. Even if your spouse does not want to participate, we still need to know about your household expenses and income.

One of the most important items of information that you can provide relates to whether a debt is "secured" or "unsecured." A "secured" debt is a debt that is backed by collateral, such as a house, car or even household items. By contrast, an "unsecured" debt is backed only by your signature. Examples of unsecured debts are credit card bills and medical bills. Please note that many finance companies ask you to list household goods at the time you obtain your loan. This usually means that you may have given the finance company a security interest in your property.

Finally, if you have a house or car, you will need a copy of the insurance declarations page – not just the insurance card.

Again, thank you for choosing GINSBERG LAW OFFICES, P.C. We will make every effort to see to it that your experience as our client is a pleasant one. We thank you for allowing us to serve you.

**PERSONAL  
INFORMATION**

**Emergency Action Alert**

Foreclosure?  
Repossession?  
Wage Garnishment?

Today's date: \_\_\_\_\_

Your Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Maiden name/former names: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Marital status: \_\_\_\_\_

Your address: \_\_\_\_\_ Apt. #: \_\_\_\_\_ Rent Own

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell/Beeper: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Name and # of someone who could reach you in an emergency: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_ E-mail: \_\_\_\_\_

Spouse's maiden/former name: \_\_\_\_\_

Spouse's social security number: \_\_\_\_\_ Spouse's work phone: \_\_\_\_\_

Spouse's home address and home phone (if different from yours): \_\_\_\_\_

How long have you lived at your home address: \_\_\_\_\_

If less than 2 years, please list previous addresses, beginning with the most recent:

\_\_\_\_\_ Dates:

\_\_\_\_\_ Dates:

**Income Information**

Marital Status: \_\_\_\_\_

Yourself

Spouse

Job title/occupation:

\_\_\_\_\_

\_\_\_\_\_

Employer:

\_\_\_\_\_

\_\_\_\_\_

How long there:

\_\_\_\_\_

\_\_\_\_\_

Payroll address:

\_\_\_\_\_

\_\_\_\_\_

City, ST Zip

\_\_\_\_\_

\_\_\_\_\_

Payroll office phone #:

\_\_\_\_\_

\_\_\_\_\_

Date next paycheck  
expected

\_\_\_\_\_

\_\_\_\_\_

**Children & Step-children**

Name	Age	Relationship	Does child live with you?	Child support \$ paid/received

**Expected changes in income:**

Describe when & why: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Income & Expenses

	<b>Yourself</b>	<b>Spouse</b>
How often are you paid?	_____	_____
<b>GROSS PAY PER PAYCHECK</b>	_____	_____
Payroll deductions:		
- FICA (Soc. Sec.)	_____	_____
- Federal tax	_____	_____
- Medicare	_____	_____
- State tax	_____	_____
- Insurance	_____	_____
- Savings/bonds	_____	_____
- Uniform/union	_____	_____
- Pension	_____	_____
- Credit Union	_____	_____
- Child support	_____	_____
- Garnishments	_____	_____
<b>TAKE HOME PAY PER PAYCHECK:</b>	_____	_____

Other sources of income (please describe) \_\_\_\_\_  
\_\_\_\_\_

## Household Expenses

	<b>Household expenses</b>	<b>Attorney's Notes</b>
Rent/mortgage payments	_____	_____
Electric bill	_____	_____
Gas bill	_____	_____
Water/sewer	_____	_____
Telephone	_____	_____
Cable TV	_____	_____
Home maintenance	_____	_____
Food	_____	_____
Clothing	_____	_____
Laundry/dry cleaning	_____	_____
Medical/dental	_____	_____
Gasoline/bus fare	_____	_____
Entertainment	_____	_____
Charity/church	_____	_____

Homeowners/renter's  
insurance

\_\_\_\_\_

\_\_\_\_\_

Life insurance

\_\_\_\_\_

\_\_\_\_\_

Health insurance  
(not deducted from pay)

\_\_\_\_\_

\_\_\_\_\_

Auto insurance

\_\_\_\_\_

\_\_\_\_\_

Non-payroll taxes

\_\_\_\_\_

\_\_\_\_\_

Car/truck payment

\_\_\_\_\_

\_\_\_\_\_

Alimony

\_\_\_\_\_

\_\_\_\_\_

Child support paid out

\_\_\_\_\_

\_\_\_\_\_

Child care expenses

\_\_\_\_\_

\_\_\_\_\_

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*(for attorney's use only)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Emergency matters . . .**

Are you currently facing a mortgage foreclosure: \_\_\_\_\_

If so, how do you know: \_\_\_\_\_

For what month is the foreclosure scheduled: \_\_\_\_\_

Are you currently facing a vehicle repossession: \_\_\_\_\_

If so, who is the finance company? \_\_\_\_\_

How far are you behind? \_\_\_\_\_

**Yearly income**

<b>Year</b>	<b>Gross income/year</b>	<b>Where employed?</b>	<b>Spouse's gross income/year</b>	<b>Where was spouse employed?</b>
2002 (year to date)				
2001				
2000				

**Tax returns**

<b>Year</b>	<b>Tax returns filed?</b>	<b>If not, why not</b>	<b>Spouse filed tax returns?</b>	<b>If not, why not?</b>
2001				
2000				
1999				

Has the IRS, State of Georgia or any other taxing entity ever advised you that a tax lien has been filed against you?

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Within the last ten (10) years, have you or your spouse not filed tax returns? If so, please describe:

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Has a lawsuit ever been filed against you - has a sheriff's deputy ever served a summons upon you?

<b>Lawsuit filed against you by:</b>	<b>Reason for lawsuit</b>	<b>County where filed</b>	<b>Case number</b>	<b>Status now</b>

Have your wages ever been garnished?

<b>Who is garnishing</b>	<b>When did garnishment begin</b>	<b>How much \$ taken to date</b>	<b>Is garnishment on-going</b>	<b>Who is plaintiff's lawyer?</b>

Have you ever lost a house to a mortgage foreclosure?

<b>Mortgage company/lender</b>	<b>Foreclosing law firm</b>	<b>When was house sold</b>	<b>Address of lost property</b>	<b>Status now</b>

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Please identify any real estate that is in your name.

<b>Property address</b>	<b>Date purchased</b>	<b>Purchase price</b>	<b>Value now</b>	<b>Total debt owed on property</b>

Please identify any cars or trucks you own.

<b>Year/make/model of vehicle</b>	<b>Date purchased</b>	<b>In whose name</b>	<b>Value now</b>	<b>Total debt owed on property</b>

Are you currently involved in a car accident claim, workers' compensation claim or any other claim that may result in money damages payable to you?

Please describe: \_\_\_\_\_

Please identify any bank accounts you own.

<b>Name of bank</b>	<b>Checking/savings?</b>	<b>In whose name</b>	<b>Current balance</b>	<b>Any other loans or credit cards with this lender?</b>


Please identify any pension, 401(k) or profit-sharing programs in which you participate

<b>Name of financial institution</b>	<b>Type of plan</b>	<b>In whose name</b>	<b>Are you still contributing?</b>	<b>Current balance</b>	<b>Any loans against this plan?</b>

Other assets not yet described (i.e. boats, stocks/bonds, antiques, valuable collections, insurance policies with cash value, guns, sporting equipment, jewelry, etc.)

<b>Asset description</b>	<b>Current value</b>	<b>Who owns this asset?</b>	<b>Has asset been pledged as collateral for a loan?</b>

Have you ever lost a car to repossession?

<b>Car finance company</b>	<b>When was vehicle seized</b>	<b>Vehicle make/model</b>	<b>Have you received notice that you still owe money on vehicle?</b>

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**Recent activity**

<b>During the last 60 days, have you done any of the following</b>	<b>Yes/No</b>	<b>Name of lender/transferee</b>	<b>Amount borrowed w/in last 60 days</b>
Used credit cards			
Taken cash advances			
Taken out any new loans			
Gave away or sold any property worth more than \$600			

Have you sold, given away or otherwise transferred any real estate within the last two (2) years. If so, please describe:

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**Have you ever filed a Chapter 7 or a Chapter 13 bankruptcy before?**

<b>Type of bankruptcy (Ch. 7 or Ch. 13)</b>	<b>Date filed</b>	<b>Was case completed or dismissed?</b>	<b>When was case closed by Court</b>	<b>Case number</b>	<b>Former BK lawyer</b>

*I certify that the information I have provided in this questionnaire is true and correct, under penalty of perjury.*

\_\_\_\_\_

Date                      Signature

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Date

Signature

## DISCLOSURE CERTIFICATE

I, the undersigned, hereby attest and affirm that all debts, whether joint debts, co-signed debts, claims or lawsuits for collection of debts, whether disputed or not, have been listed on my questionnaire.

I acknowledge that my attorneys rely on the information provided in this questionnaire in order to assist and advise me, and that it is my responsibility to provide my attorneys with a full, complete and accurate financial disclosure. I further agree to update my attorneys with regard to any incomplete information contained herein.

I further acknowledge that in the event a creditor is omitted from any bankruptcy petition filed by my attorneys as a result of an omission on this questionnaire, I will not have the protection of the Bankruptcy Court from actions by that creditor.

Date\_\_\_\_\_ Signature\_\_\_\_\_

Date\_\_\_\_\_ Signature\_\_\_\_\_

## Avoiding Conflicts of Interest

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Our law firm has represented many clients in the Atlanta area over the past several years. In very rare cases, we must decline to accept a case because of a potential conflict of interest with another present or former client. For example, we would not be able to represent you if you are currently engaged in litigation with another of our clients.

Please advise us as to the following:

1. Are you presently married: \_\_\_\_\_ Spouse's name: \_\_\_\_\_

2. Has your spouse ever filed a bankruptcy? \_\_\_\_\_

3. Are you currently involved in a divorce or child custody case? \_\_\_\_\_

Name of opposing party: \_\_\_\_\_

4. Have you ever been divorced: \_\_\_\_\_ Name of former spouse: \_\_\_\_\_

5. Have you ever filed a lawsuit against anyone? \_\_\_\_\_

Name of the other party in this lawsuit: \_\_\_\_\_

6. Has anyone ever sued you? \_\_\_\_\_ Who: \_\_\_\_\_

Why were you sued?: \_\_\_\_\_

7. Have you ever been to Court for any reason not described above (include criminal charges, workers' compensation, social security, eviction, car accident cases, divorce or child support):

Type of case: \_\_\_\_\_

Name of opposing party: \_\_\_\_\_

What happened in this case: \_\_\_\_\_

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Type of case: \_\_\_\_\_

Name of opposing party: \_\_\_\_\_

What happened in this case: \_\_\_\_\_

# Taxes Due

## Internal Revenue Service

Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

For tax year: \_\_\_\_\_ Total taxes due to IRS for tax year: \_\_\_\_\_

Return filed? \_\_\_\_\_ In whose name: \_\_\_\_\_ Installment agreement filed? \_\_\_\_\_

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## Georgia Dept. of Revenue

Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

For tax year: \_\_\_\_\_ Total taxes due to IRS for tax year: \_\_\_\_\_

Return filed? \_\_\_\_\_ In whose name: \_\_\_\_\_ Installment agreement filed? \_\_\_\_\_

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**Other taxes:** \_\_\_\_\_ Account number: \_\_\_\_\_

Address: \_\_\_\_\_

What type of tax is this? \_\_\_\_\_ Tax year: \_\_\_\_\_ Taxes due (total) \_\_\_\_\_

In whose name: \_\_\_\_\_ Return filed? \_\_\_\_\_

**Other taxes:** \_\_\_\_\_ Account number: \_\_\_\_\_

Address: \_\_\_\_\_

What type of tax is this? \_\_\_\_\_ Tax year: \_\_\_\_\_ Taxes due (total) \_\_\_\_\_

In whose name: \_\_\_\_\_ Return filed? \_\_\_\_\_

# Mortgages & Real Estate

**First Mortgage:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

How many months behind are you? \_\_\_\_\_ What happened: \_\_\_\_\_

When did you take mortgage out: \_\_\_\_\_ When did you buy property: \_\_\_\_\_

Does payment include taxes & insurance?

Address of property: \_\_\_\_\_ Is this your residence? \_\_\_\_\_

In whose name is loan? \_\_\_\_\_ Co-signers? \_\_\_\_\_ Who is this person: \_\_\_\_\_

How much is property worth in a quick sale? \_\_\_\_\_ Has foreclosure started? \_\_\_\_\_

Who is foreclosure attorney? \_\_\_\_\_

**Second Mortgage:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

How many months behind are you? \_\_\_\_\_ What happened: \_\_\_\_\_

When did you take mortgage out: \_\_\_\_\_ When did you buy property: \_\_\_\_\_

Address of property: \_\_\_\_\_ Is this your residence? \_\_\_\_\_

In whose name is loan? \_\_\_\_\_ Co-signers? \_\_\_\_\_ Who is this person: \_\_\_\_\_

How much is property worth in a quick sale? \_\_\_\_\_ Has foreclosure started? \_\_\_\_\_

Who is foreclosure attorney? \_\_\_\_\_

**Home Improvement loan:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

When did you take loan out: \_\_\_\_\_ How did you use money?: \_\_\_\_\_



# Cars & Trucks

**Vehicle 1** – (year, make & model) \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

How many months behind are you? \_\_\_\_\_ What happened: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Is this a lease or a purchase: \_\_\_\_\_ When was vehicle bought: \_\_\_\_\_

Vehicle insurance company: \_\_\_\_\_ Ins. Expiration: \_\_\_\_\_

**Vehicle 2** – (year, make & model) \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

How many months behind are you? \_\_\_\_\_ What happened: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Is this a lease or a purchase: \_\_\_\_\_ When was vehicle bought: \_\_\_\_\_

Vehicle insurance company: \_\_\_\_\_ Ins. Expiration: \_\_\_\_\_

**Vehicle 3** – (year, make & model) \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

How far behind are you: \_\_\_\_\_ In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Is this a lease or a purchase: \_\_\_\_\_ When was vehicle bought: \_\_\_\_\_

Vehicle insurance company: \_\_\_\_\_ Ins. Expiration: \_\_\_\_\_

# Furniture Loans

**Furniture 1** (describe furniture): \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When was merchandise purchased: \_\_\_\_\_ Do you still have it? \_\_\_\_\_

Do you want to surrender furniture and reduce or eliminate debt? \_\_\_\_\_

**Furniture 2** (describe furniture): \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When was merchandise purchased: \_\_\_\_\_ Do you still have it? \_\_\_\_\_

Do you want to surrender furniture and reduce or eliminate debt? \_\_\_\_\_

**Furniture 3** (describe furniture): \_\_\_\_\_

Finance/loan company: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When was merchandise purchased: \_\_\_\_\_ Do you still have it? \_\_\_\_\_

Do you want to surrender furniture and reduce or eliminate debt? \_\_\_\_\_

# Finance Companies and Loan Companies

## Finance Company Loan 1 Did you pledge household goods (describe)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_

When did you take out loan:\_\_\_\_\_ If you pledged household goods, do you  
want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

## Finance Company Loan 2 Did you pledge household goods (describe)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_

When did you take out loan:\_\_\_\_\_ If you pledged household goods, do you  
want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

## Finance Company Loan 3 Did you pledge household goods (describe)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_

When did you take out loan:\_\_\_\_\_ If you pledged household goods, do you  
want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

# Loans for Jewelry, Gifts & Household Goods

## Secured Creditor 1 (Describe items purchased)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_

When did you take out loan:\_\_\_\_\_ Do you still have items:\_\_\_\_\_

If not, who has them or what happened to items?\_\_\_\_\_

Do you want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

## Secured Creditor 2 (Describe items purchased)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_

When did you take out loan:\_\_\_\_\_ Do you still have items:\_\_\_\_\_

If not, who has them or what happened to items?\_\_\_\_\_

Do you want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

## Secured Creditor 3 (Describe items purchased)\_\_\_\_\_

Finance/loan company:\_\_\_\_\_ Acct #:\_\_\_\_\_

Address:\_\_\_\_\_ Monthly payment: \$\_\_\_\_\_

City:\_\_\_\_\_ ST: \_\_\_\_\_ Zip:\_\_\_\_\_ Total loan payoff: \$\_\_\_\_\_

In whose name:\_\_\_\_\_ Co-signers:\_\_\_\_\_ When did you take out loan:\_\_\_\_\_

Do you still have items:\_\_\_\_\_ If not, what happened to items?\_\_\_\_\_

Do you want to surrender collateral and reduce or eliminate debt?\_\_\_\_\_

# Student Loans

## Student Loan Creditor 1

Student loan lender: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When did you take out loan: \_\_\_\_\_ Name of school attended: \_\_\_\_\_

Is loan in default? \_\_\_\_\_ Is loan in deferment?: \_\_\_\_\_

## Student Loan Creditor 2

Student loan lender: \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When did you take out loan: \_\_\_\_\_ Name of school attended: \_\_\_\_\_

Is loan in default? \_\_\_\_\_ Is loan in deferment?: \_\_\_\_\_

## Health Club/Spa Membership

**Health Club Finance Company:** \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use facility: \_\_\_\_\_ Did you sign a contract: \_\_\_\_\_

Do you want to continue to use this facility/club: \_\_\_\_\_

# Credit Cards

**Credit Card Lender 1:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

\_\_\_\_\_

**Credit Card Lender 2:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

\_\_\_\_\_

**Credit Card Lender 3:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

**Credit Card Lender 4:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

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**Credit Card Lender 5:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

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**Credit Card Lender 6:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

**Credit Card Lender 7:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

\_\_\_\_\_

**Credit Card Lender 8:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

\_\_\_\_\_

**Credit Card Lender 9:** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When is the last time you used this card? \_\_\_\_\_ What did you buy: \_\_\_\_\_

During the last 6 months, have you used this card more frequently than before \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

## Medical Bills

**Medical provider 1:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_

---

**Medical provider 2:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_

---

**Medical provider 3:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_



**Medical provider 4:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_

---

**Medical provider 5:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_

---

**Medical provider 6:** \_\_\_\_\_ Acct. #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total balance due: \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

Do you still use this health care provider? \_\_\_\_\_ When last used: \_\_\_\_\_

Collection agency name, address, acct # \_\_\_\_\_

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## Other Creditors/Extra space

### Pension or 401(k) Loans

Type of investment \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

When did you take loan out? \_\_\_\_\_ How long will loan last? \_\_\_\_\_

---

**Creditor/Lender :** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

What type of debt is this? \_\_\_\_\_ What did you buy: \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

---

**Creditor/Lender :** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

What type of debt is this? \_\_\_\_\_ What did you buy: \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

---

**Creditor/Lender :** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

What type of debt is this? \_\_\_\_\_ What did you buy: \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

---

**Creditor/Lender :** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

What type of debt is this? \_\_\_\_\_ What did you buy: \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

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**Creditor/Lender :** \_\_\_\_\_ Acct #: \_\_\_\_\_

Address: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ Total loan payoff: \$ \_\_\_\_\_

In whose name: \_\_\_\_\_ Co-signers: \_\_\_\_\_

What type of debt is this? \_\_\_\_\_ What did you buy: \_\_\_\_\_

Collection agency name, address, acct #: \_\_\_\_\_

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## For Attorney's Use Only -Debt Analysis Worksheet

_____	1. _____	_____	_____
_____	2. _____	_____	_____
_____	3. _____	_____	_____
_____	4. _____	_____	_____
_____	5. _____	_____	_____
_____	6. _____	_____	_____
_____	7. _____	_____	_____
_____	8. _____	_____	_____
_____	9. _____	_____	_____
_____	10. _____	_____	_____
_____	11. _____	_____	_____
_____	12. _____	_____	_____
_____	13. _____	_____	_____
_____	14. _____	_____	_____
_____	15. _____	_____	_____
_____	16. _____	_____	_____
_____	17. _____	_____	_____
_____	18. _____	_____	_____

Total Arrearage: \_\_\_\_\_ Total Priority: \_\_\_\_\_

Total Secured: \_\_\_\_\_ Total unsecured (100%) \_\_\_\_\_

Total general unsecured: \_\_\_\_\_ Total non-exempt equity: \_\_\_\_\_

Estimated plan payment: \_\_\_\_\_ % Plan: \_\_\_\_\_