

PREPARING FOR BANKRUPTCY

The new bankruptcy law became effective on 17 October 2005. The information contained below is intended to advise you of your obligations under the new law and to help ensure our compliance with the new law. Please read all of the information carefully and follow all instructions to the best of your ability.

The initial office visit or telephone interview is intended to acquaint you with basic information about bankruptcy and to assess your current financial situation in order to determine your need and eligibility for the filing of a bankruptcy case.

In order to comply with the new bankruptcy law and to effectively complete this evaluation you will need to supply as much of the following information as possible:

✍ **IDENTIFICATION.** The new bankruptcy law requires that you provide proof that you are who you say you are. Please bring with you to the initial office visit an official photo ID (i.e., a driver's license) and your Social Security card.

✍ **PROOF OF INCOME.** The new bankruptcy law requires that you provide proof of your average monthly gross income from all sources for the **last 6 months beginning with the first month before your scheduled office visit.** Please bring with you to the initial office visit all available pay stubs or other records of income for the past seven months to include records or receipts from employment income, tips, bonuses, commissions, child support, spousal support, support from someone paying or sharing your living expenses, rental income, unemployment compensation, social security, retirement, pension, interest, dividends, or income from any other source. If you are filing with a spouse then you will need to provide this information for both you and your spouse.

✍ **DEDUCTIONS TO INCOME.** The new bankruptcy law requires that you provide proof of any deductions from your income to include federal and state taxes, retirement plan contributions, retirement plan loan repayments, insurance, court-ordered payments, garnishments, and all other deductions whether voluntary or involuntary. If you have your own business, you must provide a complete listing of all of your monthly business expenses including a year-to-date or recent monthly Profit & Loss Statement for your business, if possible. Please bring with you to the initial office visit as much documentation as you have available for the **last seven months.**

✍ **BANKING RECORDS.** Please provide monthly statements from your bank, credit union, or other financial institution for the **last seven months.**

✍ **INCOME TAX RETURNS.** The new bankruptcy law requires that you provide proof of your annual gross income for the **last 4 years** and proof that you filed tax returns for these years. Please bring with you to the initial office visit copies of your filed income tax returns for the **last 4 years.** If have not filed any of these tax returns please begin that process as soon as possible, as we will not be able to file a bankruptcy until those tax returns are filed.

✍ **HOUSEHOLD EXPENSES.** The new bankruptcy law requires a listing of your monthly household expenses including those for mortgage or rent, utility services (electricity, gas, fuel oil, propane, water and sewage), telephone service, cable or satellite television service, home maintenance, food, clothing, laundry and dry cleaning, medical and dental, transportation, recreation, clubs, entertainment, charitable contributions, insurance (homeowner or renter, life, health, auto), taxes on property, alimony, maintenance, child support, etc. Please bring with you to the initial office visit as much documentation as you have available for the **last seven months.**

✍ **CREDIT REPORT.** A new Federal law makes you eligible to receive a free credit report annually from each of the three credit reporting agencies. Please request your free credit report online by visiting www.annualcreditreport.com. You may also request your free credit report by mail or by phone. Mail your request to Annual Credit Report Service, PO Box 105281, Atlanta, GA 30348-5281 or phone 1-877-322-8228 toll free. An Annual Credit Report Request Form is attached.

✍ **DEBT COUNSELING REQUIREMENT.** You are not eligible to file a bankruptcy unless you receive an individual or group briefing from an approved nonprofit budget and counseling agency. That briefing must outline your opportunities for available credit counseling and assist you in performing a related budget analysis. It must occur within 180 days prior to filing the bankruptcy. It can take place on the internet or by telephone. If you have not yet received the counseling and you want our assistance, we will help you make the arrangements for it.

✍ **ACCOUNT STATEMENTS.** The new bankruptcy law requires a listing of all of your debts including those for credit cards, medical bills, personal loans, auto loans, furniture loans, jewelry loans, lawsuits, etc. Please bring with you to the initial office visit as much documentation as you have available for the **last 90 days** on all such debts.

✍ **PROPERTY DOCUMENTS.** The new bankruptcy law requires documentation of all contracts and security agreements including those for mortgages and leases, refinancing, transfers of ownership, time shares, stocks, car loans and leases, furniture rental and leases, jewelry loans, etc. Please bring with you to the initial office visit as much documentation as you have available for the **last four years**.

✍ **PROOF OF INSURANCE.** The new bankruptcy law requires proof of insurance on all property secured by a lien including homeowners insurance, automobile insurance, etc. Please bring with you to the initial office visit as much documentation as you have available.

✍ **DOMESTIC SUPPORT OBLIGATIONS.** If you pay any child support, alimony, or support you need to bring all documents associated with such payments. You must provide some proof that you are current on these obligations and provide the name and address where those documents are required to be sent.

✍ **OTHER DOCUMENTS.** The production of other documents as required by the new bankruptcy law includes those for any bankruptcy you filed during the **last eight years**, a list of all of your addresses for the **last three years**, documentation of any felony conviction, money or property received from a trust or probate estate, Educational IRAs or tuition programs, etc. Please bring with you to the initial office visit as much documentation as you have available.

If you do not have any of the above information available for the initial office visit or telephone interview, then you may need to contact your employer, human resources officer, income tax preparer, bank or credit union, service providers or other sources to request this information. **Please do not cancel your appointment for your initial office visit or telephone interview simply because you do not have these records.** We may be able to assist you in retrieving these records.

Statement Mandated by Section 527 (b) of the Bankruptcy Code

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. **THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST.** Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of creditors where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you will want to find out what should be done from someone with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.

WE ARE A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

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If you do not follow these rules you could be subject to Criminal Sanctions including JAIL and FINES. If you do not follow these rules your case will be dismissed and you may not be able to re file your case.

Rule #1– The information you give to an attorney, a staff member of the law firm, the Bankruptcy Trustee, or the Bankruptcy Court that is provided with your petition and during the case must be complete, accurate, and truthful.

Rule #2– Everything you own and every debt you owe must be completely and accurately disclosed in the documents filed to commence this case. Bankruptcy is not a “pick and choose” proceeding. You do not leave some debts in and leave some debts out. Everything must be included. You must value each item you own at the rate it would cost you to replace the item with one of the same condition, age, and usefulness.

Rule #3 – You will be required to complete a current monthly budget. This will be performed with your attorney. This budget will be based on your Current Monthly Income and your regular monthly expenses. This Current Monthly Income is more than just that paid to you by your employer and will include any income received in the past 6 months commencing with the first full month before your bankruptcy filing. This could include government assistance, social security, unemployment, or side jobs or any other sources. The regular expense should be as close as possible and should be based on a reasonable inquiry.

Rule #4– The Bankruptcy Code requires you to perform certain tasks including filing certain documents with the Court. Your attorney will notify you of the need and time limits for performing these tasks. If you fail to meet these deadlines your case will automatically be dismissed and you may be barred from re filing a case.

All of the information you provide will be subject to audit by the United States Department of Justice. If you fail to provide this information your case may be dismissed. If you act dishonestly you may be subject to criminal sanctions.

These rules are given as a warning and not as an attempt to prevent you from filing bankruptcy. Bankruptcy is a right provided to you under Federal Law. These Rules are only given to prevent people from intentionally abusing the bankruptcy system by cheating and being dishonest. This notice is required by law under the Bankruptcy Reform Act enacted by Congress under intense lobbying by the credit industry and should not intimidate you and prevent you from filing bankruptcy. For over 64 years, our office has assisted people with bankruptcy. During that period of time, our office has observed that almost all of our clients are honest and hardworking people who due to circumstances beyond their control cannot repay their debts.

Client's Initials

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy Worksheet

Instructions

Please answer these questions carefully. The information you give us will be used to compile the schedules the Court requires to have your bankruptcy case approved. Your answers will determine what will be on your bankruptcy petition. Any errors, omissions or misrepresentations may seriously affect the discharge of your debts (meaning that you may need to pay them despite your having filed for bankruptcy). Discuss this with your attorney.

Where space permits, answer the questions on this questionnaire. However, do not let the size of the space available determine the extent of your response. If additional space is necessary, use a separate sheet or the back of this form, identifying by number and letter the question answered. A question asking for a date, or when something happened, can usually be answered with the month and year only. A question asking for an address must include the ZIP code, along with a complete street or post office box address.

There are many parts of the worksheet that will ask you to place a value on property that you own. Please use the following as a guideline for determining those values:

Personal Property & Household Goods: When filling out this part of the worksheet, use a "replacement value" without deductions for cost of sale or marketing. That means the price a retail merchant would charge for property of that kind considering the age and condition of the property at the time the value is determined (consignment shops, eBay, etc.). Cars should be valued by the N.A.D.A. Official Used Car Guide. Your attorney will look this up for you.

Real Property: When valuing real property (land and any structures built on it), indicate the appraised tax value from your yearly property tax statement or, alternatively, base the value upon what similar properties in your area are bringing.

The instructions in this questionnaire should answer most of your questions. In addition, we have tried to eliminate "legalese" (or lawyer talk) by using clear and simple language. Where terms are used that we feel might be unfamiliar to you, we try to provide clear definitions. Nonetheless, if you find any questions unclear, please call, as accuracy at this stage is of utmost importance.

Remember, these questions *must* be answered fully and accurately. If you absolutely cannot remember, find out, or guess with reasonable accuracy, answer "Unknown." The effort you expend now will help determine how quickly your bankruptcy can be filed and how complete your discharge will be.

Documents Needed

You will need to bring the following documents to our office when you come in to go over your completed worksheet. It is very important that you bring these items with you:

- 1. Certificate of Credit Counseling (if you have it)
- 2. Copies of any promissory notes, Deeds of Trust, property tax statements, or contracts on any real estate you own or are buying.
- 3. Copies of any notes or retail installment contracts from banks, credit unions, finance companies or other lenders. Also, any security agreements or other documents listing your property as collateral for the purchase of cars, furniture, mobile homes, other personal property, or cash loans.
- 4. Current statements and bills from **all** creditors. Include creditors even the creditors with a zero balance.
- 5. Tax returns for last four (4) years and corresponding state income tax returns for the same period.
- 6. Pay stubs for the last six (6) months from all employers.
- 7. Proof of Insurance. If the policy is new, please provide the "binder" which is issued until the policy is in full force. If the policy is not new, then please provide the declarations page. Insurance information must state, at a minimum, the names of the insured's (you and other drivers in the case of car insurance), the policy number, the collateral that is insured, and the loss payee (the company(ies) that have liens on the property).
- 8. All legal documents pertaining to divorces or lawsuits which are pending or which have been finalized in the past 24 months.
- 9. Copies of all life insurance policies that have a cash value. You do not need to bring copies of term life policies.
- 10. All judgments or court orders entered against you or in your favor.
- 11. All executory contracts; for instance, leases, contracts for sale or deed and lease-purchase contracts.

Client Information

Part 1: Identify Yourself

Debtor 1 Male Female

Debtor 2 Male Female

1. Your Full Name

SR, JR, _____

SR, JR, _____

First Name Middle Last

First Name Middle Last

Home Address

Home Address

City/ State/ Zip Code

City/ State/ Zip Code

Mailing Address (if Different)

Mailing Address (if Different)

City/ State/ Zip Code

City/ State/ Zip Code

County of Residence

County of Residence

Social Security/Tax ID Number

Social Security/Tax ID Number

Driver's License Number State Date of birth

Driver's License Number State Date of birth

Please Check: Individual Joint
 Partnership
 Other _____

My debts are: Non-Business (Consumer)
 Business
 Other

Marital Status: Single Married Divorced Widowed Life Partner Separated

If married, please fill out Spouse/Joint Debtor section even if your spouse is not filing.

If married, do you and your spouse maintain separate households? Yes No

Venue for Debtor 1

Have you lived at your current address for at least the past 180 days: Yes No

If "No," list previous cities, states, and dates (use additional pages if necessary):

Venue for Debtor 2

Have you lived at your current address for at least the past 180 days: Yes No

If "No," list previous cities, states, and dates (use additional pages if necessary):

Please Initial: Debtor 1 _____

Debtor 2 _____

Credit Counseling

Debtor 1

1. Credit counseling has been received and a certificate from the agency is attached

2. Credit counseling has been received, but a certificate from the agency has not been received.

3. Temporary waiver requested. Exigent circumstances:

4. Credit counseling is not required because of:
 Incapacity Disability Active duty

Debtor 2

1. Credit counseling has been received and a certificate from the agency is attached

2. Credit counseling has been received, but a certificate from the agency has not been received.

3. Temporary waiver requested. Exigent circumstances:

4. Credit counseling is not required because of:
 Incapacity Disability Active duty

Do you rent your residence?

Yes No

Landlord has a judgment against you for possession of your residence (eviction judgment) and you want stay in the residence.

Name of Landlord _____

Address of Landlord _____

Number Street _____

City _____ State _____ Zip Code _____

- Under the state or other nonbankruptcy law that applies to the judgment for possession (*eviction judgment*), I have the right to stay in my residence by paying my landlord the entire delinquent amount.
- I have given the bankruptcy court clerk a deposit for the rent that would be due during the 30 days after I file the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

Filing Information

Have you taken cash advances on any credit cards in the last 90 days? Yes No

Creditor Name: _____ Date taken: _____ Amount: \$ _____

Creditor Name: _____ Date taken: _____ Amount: \$ _____

Creditor Name: _____ Date taken: _____ Amount: \$ _____

Creditors to be notified by phone:
Please list any creditor who needs to be notified by phone to prevent any action that the creditor may take against you. Imminent foreclosures, repossessions, or lawsuits are good examples. Please do not list any credit cards or other unsecured debts unless that creditor has filed a lawsuit.

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

Creditor	Phone Number	Reason

Prior Bankruptcies

Have you (Debtor 1) filed for bankruptcy within the last 8 years? If so complete:

Chapter	District (City, State)	When MM/ DD / YYYY	Case Number	Date Discharged or Dismissed

Have you (Debtor 2) filed for bankruptcy within the last 8 years? If so complete:

Chapter	District (City, State)	When MM/ DD / YYYY	Case Number	Date Discharged or Dismissed

Pending/Related Bankruptcies

Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? If so complete:

Chapter	District (City, State)	Date Filed	Case Number	Debtor Name	Association (Spouse, partner, affiliate, etc.)

Please Initial: Debtor 1 _____

Debtor 2 _____

Dependents

If married and filing individually, please include your spouse/partner as a dependent (use additional sheets if necessary.)

Name	Age	Relationship

Occupation

	Debtor #1	Debtor #2
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Job #1	Job #1
Occupation	_____	_____
Employer	_____	_____
How Long?	_____	_____
Address	_____	_____
City/State/Zip	_____	_____
Telephone #	_____	_____
	Job #2	Job #2
Occupation	_____	_____
Employer	_____	_____
How Long?	_____	_____
Address	_____	_____
City/State/Zip	_____	_____
Telephone #	_____	_____

Added additional sheets (Please attach)

Real Property

Please complete the following worksheet. Your responses will assist us in determining the most beneficial approach to your case. We ask that you assign a value to your real property. When valuing real property (land and any structures built on it), indicate the appraised tax value from your yearly property tax statement or, alternatively, base the value upon what similar properties in your area are bringing.

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. Answer every question.

Indicate who owns each item by checking the appropriate box for each piece of property.

Debtor 1 Debtor 2 Debtor 1 and Debtor 2 only Another (New Option) C = Community

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

YOUR HOMESTEAD

No.

Yes.

Surrender?

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

1.1

What is the property? Check all that apply

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

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

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

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

Check if this is community property

Who has an interest in the property? Check one

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

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

Street address, if available, or other description

City State ZIP code

County

OTHER REAL PROPERTY (1)

If you own or have more than one, piece of real property list here:

Surrender?

1.2

What is the property? Check all that apply

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

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

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

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

Check if this is community property

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only

Street address, if available, or other description

City State ZIP code

County

Please Initial: Debtor 1 _____

Debtor 2 _____

At least one of the debtors and another (see Instructions)

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

OTHER REAL PROPERTY (2)

Surrender?

1.3

Street address, if available, or other description

City State ZIP code

County

What is the property? Check all that apply

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

Who has an interest in the property? Check one

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

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

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

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

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

Check if this is community property (see Instructions)

OTHER REAL PROPERTY (3)

Surrender?

1.4

Street address, if available, or other description

City State ZIP code

County

What is the property? Check all that apply

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

Who has an interest in the property? Check one

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

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

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

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

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

Check if this is community property (see Instructions)

Added additional sheets (Please attach)

Personal Property

When filling out this part of the worksheet, use a "replacement value" without deductions for cost of sale or marketing. That means the price a retail merchant would charge for property of that kind considering the age and condition of the property at the time the value is determined (consignment shops, eBay, etc). Cars should be valued by the N.A.D.A. Official Used Car Guide or Blue Book. Your attorney will look this up for you.

Please use additional sheets if you are asked to list each piece of property separately.

Indicate who owns each item by checking the appropriate box for each piece of property.

Debtor 1 Debtor 2 Debtor 1 and Debtor 2 only Another (New Option) C = Community

Part 2: Describe Your Vehicles

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

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

No

Yes.

Surrender?

Leased? (If Yes, complete Leases/Executory Contracts section)

3.1. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other Information: _____

Who has an interest in the property? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property

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

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

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

Surrender?

Leased? (If Yes, complete Leases/Executory Contracts section)

3.2. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other Information: _____

What is the property? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property

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

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

Surrender? Leased? (If Yes, complete Leases/Executory Contracts section)

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

What is the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property

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

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

Surrender? Leased? (If Yes, complete Leases/Executory Contracts section)

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

What is the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property

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

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

Surrender? Leased? (If Yes, complete Leases/Executory Contracts section)

3.5. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other Information: _____

What is the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property

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

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

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

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

No

Yes.

Surrender?

Leased? (If Yes, complete Leases/Executory Contracts section)

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

What is the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property

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

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

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

No

Yes.

Surrender?

Leased? (If Yes, complete Leases/Executory Contracts section)

4.1. Make: _____

Model: _____

Year: _____

Other Information: _____

What is the property? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property

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

Current value of the entire property?
\$ _____

Current value of the portion you own?
\$ _____

Added additional sheets (Please attach)

Part 3: Describe Your Personal and Household Items

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

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

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

Describe: _____

\$ _____

7. Electronics

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

Describe: _____

\$ _____

8. Collectibles of value

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

Describe: _____

\$ _____

9. Equipment for sports and hobbies

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

Describe: _____

\$ _____

10. Firearms

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

Describe: _____

\$ _____

11. Clothes

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

Describe:

\$ _____

12. Jewelry

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

Describe:

\$ _____

13. Non-farm animals

Examples: Dogs, cats, birds, horses

Describe:

\$ _____

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

Describe:

\$ _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3.

Add additional sheets (Please attach if needed) (If you use additional sheets, please indicate item number and description of the property).

Part 4: Describe Your Financial Assets

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

16. Cash

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

Cash

\$ _____

17. Deposits of money

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

- No.
 Yes.

Institution name:

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

18. Bonds, mutual funds, or publicly traded stocks

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

No. Institution or issuer name: _____ \$ _____

Yes. _____ \$ _____

_____ \$ _____

_____ \$ _____

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

No. Name of entity: _____ % of ownership: _____ \$ _____

Yes. Give specific information about them: _____ % \$ _____

_____ % \$ _____

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

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

No.

Yes. Give specific information about them: Name of entity: _____ \$ _____

_____ \$ _____

_____ \$ _____

21. Retirement or pension accounts

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

No.

Yes. List each account separately

Type of account:	Institution name:	
401(k) or similar plan:	_____	\$ _____
Pension plan:	_____	\$ _____
IRA:	_____	\$ _____
Retirement account:	_____	\$ _____
Keogh:	_____	\$ _____
Additional account:	_____	\$ _____
Additional account:	_____	\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No.

Yes. List each account separately

Type of account:	Institution name:	
Electric	_____	\$ _____
Gas	_____	\$ _____
Heating oil:	_____	\$ _____
Security deposit on rental unit:	_____	\$ _____
Prepaid rent:	_____	\$ _____
Telephone:	_____	\$ _____
Water:	_____	\$ _____
Rented furniture:	_____	\$ _____
Other:	_____	\$ _____

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

- No.
 Yes.

Issuer name and description

_____	\$ _____
_____	\$ _____
_____	\$ _____

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

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

Give specific information about them:

\$ _____

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Give specific information about them:

\$ _____

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

Give specific information about them:

\$ _____

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions

28. **Tax refunds owed to you**

Give specific information about them, including whether you already filed the returns and the tax years:

Federal: \$ _____

State: \$ _____

Local: \$ _____

29. **Family support**

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

- No.
 Yes.

Give specific information:

Alimony: \$ _____

Maintenance: \$ _____

Support: \$ _____

Divorce settlement: \$ _____

Property settlement: \$ _____

30. Other amounts someone owes you

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

- No.
- Yes. Give specific information:

	\$ _____
--	----------

31. Interests in insurance policies

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

- No.
- Yes. Name the insurance company of each policy and list its value:

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

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

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

- No.
- Yes. Give specific information:

	\$ _____
--	----------

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

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

- No.
- Yes. Describe each claim:

	\$ _____
--	----------

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

Describe each claim:

	\$ _____
--	----------

35. Any financial assets you did not already list

Describe each claim:

	\$ _____
--	----------

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. \$

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

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

- No. Go to Part 6
- Yes. Go to line 38

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

38. Accounts receivable or commissions you already earned

- No.
- Yes.

\$ _____

39. Office equipment, furnishings, and supplies

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

- No.
- Yes. Describe:

\$ _____

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

No.

Yes. Describe: \$ _____

41. Inventory

No.

Yes. Describe: \$ _____

42. Interests in partnerships or joint ventures

No.

<input type="checkbox"/> Yes. Describe:	Name of entity	% of ownership	
	_____	_____	\$ _____
	_____	_____	_____
	_____	_____	_____

43. Customer lists, mailing lists, or other compilations

No.

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No.

Yes. Describe: \$ _____

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

No. \$ _____

Yes. Describe: _____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. \$

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

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

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

No. Go to Part 7

Yes. Go to line 47:

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

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

\$ _____

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

Give specific information \$ _____

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

\$ _____

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

\$ _____

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

\$ _____

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6.** \$

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

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

Examples: Season tickets, country club membership

Give specific information \$ _____
 \$ _____
 \$ _____

Part 8: **(Note for Attorney: Totals for each Part are calculated by BankruptcyPRO)**

CREDITORS

Please list SECURED creditors first, followed by PRIORITY and UNSECURED creditors.

If additional space is needed, please provide the same information on a separate page.

What is a secured debt? A secured debt is a debt which has collateral or security in the form of property. Houses, land, cars, large appliances and furniture are all examples of secured debts if they have not already been paid off.

What is a priority debt? A priority debt is a tax or administrative debt. Monies owed to the Internal Revenue Service, child support arrearages, and other taxing authorities are the best examples of priority debt. If past due child support is owed, you must provide the name and address of the agency and the recipient. However, there are many circumstances where the IRS could also be a secured (if they have a lien on property) or even an unsecured debt (if the debt is too old).

What is an unsecured debt? Unsecured creditors do not have any collateral to secure payment of your debt. Examples include most credit cards, medical bills, and signature loans.

If you are not sure of the type of debt list it as unsecured.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, use additional sheets and attach.

List All Secured Claims

List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditor as a noticing party for that creditor (Example collection agency or attorney). As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim	Column B Value of collateral	Column C Contract payment
-----------------------------	---------------------------------	------------------------------

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only An agreement you Made (Such as mortgage or secured car loan)

Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)

Debtor 1 and Debtor 2 only Judgment lien from a lawsuit

At least one of the debtors and another Other _____

Check if this is a community debt

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____

Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only An agreement you Made (Such as mortgage or secured car loan)

Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)

Debtor 1 and Debtor 2 only Judgment lien from a lawsuit

At least one of the debtors and another Other _____

Check if this is a community debt

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____

Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is a community debt

Nature of lien. Check all that apply

An agreement you Made (Such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other _____

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)
Name: _____
Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is a community debt

Nature of lien. Check all that apply

An agreement you Made (Such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other _____

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)
Name: _____
Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is a community debt

Nature of lien. Check all that apply

An agreement you Made (Such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other _____

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)
Name: _____
Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is a community debt

Nature of lien. Check all that apply

An agreement you Made (Such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other _____

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____
Address: _____

Surrender? Check here if you dispute this claim. Amount disputed: \$ _____.

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

Creditor's Name _____

Number Street _____

City State Zip Code _____

Who owes the debt? Check one

Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is a community debt

Nature of lien. Check all that apply

An agreement you Made (Such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other _____

Date debt was Incurred: _____ **Date of last payment:** _____ **Account number:** _____ **% Interest Rate (if known)%** _____ %

Co-Debtors (if any)
Please provide name and address for each co-debtor

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____
Address: _____

Added additional sheets (Please attach)

List All of Your PRIORITY Unsecured Claims

List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than five priority unsecured claims, . If more than one creditor holds a particular claim, list the other creditors as a noticing party.

Be as complete and accurate as possible. Use this section for creditors with PRIORITY unsecured claims and for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on the Real Property section, the Personal Property section and the Leases/Executory Contracts section . Do not include any creditors with partially secured claims that are listed on the Secured Creditors section above if more space is needed, add additional sheets and attach.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Check here if you dispute this claim. Amount disputed: \$ _____.

Account number _____ **\$** _____ **\$** _____ **\$** _____

Creditor's Name _____ **Date incurred?** _____

Address _____

City _____ State _____ Zip Code _____

Who incurred the debt? Check one

Type of PRIORITY unsecured claim:

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this is a community debt

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated _____
- Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____

Address: _____

Check here if you dispute this claim. Amount disputed: \$ _____.

Account number _____ **\$** _____ **\$** _____ **\$** _____

Creditor's Name _____ **Date incurred?** _____

Address _____

City _____ State _____ Zip Code _____

Who incurred the debt? Check one

Type of PRIORITY unsecured claim:

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this is a community debt

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated _____
- Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____

Address: _____

Check here if you dispute this claim. Amount disputed: \$ _____.

Account number _____ **\$** _____ **\$** _____ **\$** _____

Creditor's Name _____ **Date incurred?** _____

Address _____

City _____ State _____ Zip Code _____

Who incurred the debt? Check one

Type of PRIORITY unsecured claim:

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this is a community debt

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated _____
- Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Name: _____

Address: _____

Check here if you dispute this claim. Amount disputed: \$ _____.

Account number _____ **\$** _____ **\$** _____ **\$** _____

Creditor's Name _____ **Date incurred?** _____

Address _____

City _____ State _____ Zip Code _____

Who incurred the debt? Check one

Type of PRIORITY unsecured claim:

Noticing Parties
(Collection agency, attorney for creditor, etc.)

Please Initial: Debtor 1 _____ Debtor 2 _____

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations	
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Taxes and certain other debts you owe the government	Name: _____
<input type="checkbox"/> Debtor 1 and Debtor 2 only		Address: _____
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	_____
<input type="checkbox"/> Check if this is a community debt	<input type="checkbox"/> Other Specify _____	_____

Check here if you dispute this claim. Amount disputed: \$ _____.

_____	Account number	_____	\$	_____	\$	_____	\$
_____	Creditor's Name	_____		_____		_____	
_____	Date incurred?	_____					
_____	Address	_____					
_____		_____					
_____	City	State	Zip Code	_____			

Who incurred the debt? Check one	Type of PRIORITY unsecured claim:	Noticing Parties <i>(Collection agency, attorney for creditor, etc.)</i>
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations	
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Taxes and certain other debts you owe the government	Name: _____
<input type="checkbox"/> Debtor 1 and Debtor 2 only		Address: _____
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	_____
<input type="checkbox"/> Check if this is a community debt	<input type="checkbox"/> Other Specify _____	_____

List All of Your NONPRIORITY Unsecured Claims

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in the Secured Creditor section or the Priority Unsecured section. If more than one creditor holds a particular claim, list the other creditors as a noticing party.

Be as complete and accurate as possible. Use this section for creditors with PRIORITY unsecured claims and for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on the Real Property section, the Personal Property section and the Leases/Executory Contracts section. Do not include any creditors with partially secured claims that are listed on the Secured Creditors section above. If more space is needed, add additional sheets and attach.

_____	Account number	_____	Total claim
_____	Date incurred?	_____	\$ _____
_____	Creditor's Name	_____	
_____	Address	_____	
_____		_____	
_____	City	State	Zip Code

Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	Noticing Parties <i>(Collection agency, attorney for creditor, etc.)</i>
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Name: _____
<input type="checkbox"/> Debtor 1 and Debtor 2 only		Address: _____
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	_____
<input type="checkbox"/> Check if this is a community debt	<input type="checkbox"/> Other Specify _____	_____

_____	Account number	_____	\$
_____	Date incurred?	_____	
_____	Creditor's Name	_____	
_____	Address	_____	
_____		_____	
_____	City	State	Zip Code

Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	Noticing Parties
<input type="checkbox"/> Debtor 1 only		
<input type="checkbox"/> Debtor 2 only		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this is a community debt		

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(Collection agency, attorney for creditor. etc.)

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Name: _____
Address: _____

Account number _____ \$ _____
Date incurred? _____

Creditor's Name _____
Address _____
City _____ State _____ Zip Code _____

Noticing Parties

(Collection agency, attorney for creditor. etc.)

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Name: _____
Address: _____

Account number _____ \$ _____
Date incurred? _____

Creditor's Name _____
Address _____
City _____ State _____ Zip Code _____

Noticing Parties

(Collection agency, attorney for creditor. etc.)

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Name: _____
Address: _____

Account number _____ \$ _____
Date incurred? _____

Creditor's Name _____
Address _____
City _____ State _____ Zip Code _____

Noticing Parties

(Collection agency, attorney for creditor. etc.)

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Name: _____
Address: _____

Account number _____ \$ _____
Date incurred? _____

Creditor's Name _____
Address _____

Please Initial: Debtor 1 _____ Debtor 2 _____

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

City State Zip Code

Who incurred the debt? Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor. etc.)
Name: _____
Address: _____

Creditor's Name _____ **Account number** _____ **\$** _____
Date incurred? _____
Address _____

City State Zip Code

Who incurred the debt? Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor. etc.)
Name: _____
Address: _____

Creditor's Name _____ **Account number** _____ **\$** _____
Date incurred? _____
Address _____

City State Zip Code

Who incurred the debt? Check one
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is a community debt

Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other Specify _____

Noticing Parties
(Collection agency, attorney for creditor. etc.)
Name: _____
Address: _____

Please Initial: Debtor 1 _____ Debtor 2 _____

DOMESTIC SUPPORT OBLIGATION

Please list here the name of the recipient(s) of any child support or alimony you are obligated to pay even if you are current on your payments. If there are more than one recipient please copy this page and complete it for each recipient. We must have the actual address of the recipient, not the address for the Payment Center.

Check here if you dispute this Claim; Amount disputed: \$ _____

Recipient Name: _____

Address: _____

Telephone #: _____

Whose Debt? Debtor 1 Debtor 2 Debtor 1 and Debtor 2

Date of Most Recent Order: _____

Are you current on your payments? Yes No

Court Case No. or Division of Family Support Case No.: _____

Description of Support Type:

Attorney or Staff use only: Secured Priority Special Unsecured

Direct pay starting: _____ In Plan at _____%

Retain Collateral Surrender Collateral Redeem Collateral Reaffirm Debt

Remarks:

Please Initial: Debtor 1 _____ Debtor 2 _____

Leases and Executory Contracts

(Attach additional sheets if necessary)

Please check "Yes" or "No" in the box indicating whether or not you have unexpired leases or executory contracts of any kind? **Leases** include apartment leases, house leases, car leases, etc.

Executory contracts include contracts for services, contracts for deed, contracts for sale, cell phone contracts, etc. If "Yes", please list **all** parties to the contract or lease, describe the nature of the interest, and **attach copies of the lease or contract to this package**. Please indicate whether you wish to assume (keep) or reject (end) the contract or lease by checking "Yes" or "No". **Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page.**

Do you have any Leases or Executory Contracts?

Yes No

Is the contract/lease in default? Yes No

Person or Company with whom you have the contract or lease

What is the contract or lease for

Co-Debtors (if any)

Please provide name and address for each co-debtor

Creditor's Name

Number Street

City State Zip Code

Who incurred the contract? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this is a community debt

How are handling the contract/lease Check one

- Assume
- Reject
- Assign
- Unknown

Contract payment: \$ _____

Arrearage amount (amount pass due): \$ _____

Term of contract/lease: _____

No of payments remaining: _____

Is the Contract (lease) in default? Yes No

Person or Company with whom you have the contract or lease

What is the contract or lease for

Co-Debtors (if any)

Please provide name and address for each co-debtor

Creditor's Name

Number Street

City State Zip Code

Who incurred the contract? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this is a community debt

How are handling the contract/lease Check one

- Assume
- Reject
- Assign
- Unknown

Contract payment: \$ _____

Arrearage amount (amount pass due): \$ _____

Term of contract/lease: _____

No of payments remaining: _____

Is the Contract (lease) in default? Yes No

Person or Company with whom you have the contract or lease

What is the contract or lease for

Co-Debtors (if any)

Please provide name and address for each co-debtor

Creditor's Name		
Number	Street	
City	State	Zip Code

- Who incurred the contract?** Check one
- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
 - Check if this is a community debt

- How are handling the contract/lease** Check one
- Assume
 - Reject
 - Assign
 - Unknown

Contract payment: \$ _____

Arrearage amount (amount pass due): \$ _____

Term of contract/lease: _____

No of payments remaining: _____

Is the Contract (lease) in default? Yes No

Person or Company with whom you have the contract or lease

What is the contract or lease for

Co-Debtors (if any)

Please provide name and address for each co-debtor

Creditor's Name		
Number	Street	
City	State	Zip Code

- Who incurred the contract?** Check one
- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
 - Check if this is a community debt

- How are handling the contract/lease** Check one
- Assume
 - Reject
 - Assign
 - Unknown

Contract payment: \$ _____

Arrearage amount (amount pass due): \$ _____

Term of contract/lease: _____

No of payments remaining: _____

Is the Contract (lease) in default? Yes No

Person or Company with whom you have the contract or lease

What is the contract or lease for

Co-Debtors (if any)

Please provide name and address for each co-debtor

Creditor's Name		
Number	Street	
City	State	Zip Code

- Who incurred the contract?** Check one
- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
 - Check if this is a community debt

- How are handling the contract/lease** Check one
- Assume
 - Reject
 - Assign
 - Unknown

Contract payment: \$ _____

Arrearage amount (amount pass due): \$ _____

Term of contract/lease: _____

No of payments remaining: _____

Your Monthly Income

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

	Debtor 1	Debtor 2 or non filing spouse
Pay frequency	<input type="checkbox"/> monthly <input type="checkbox"/> weekly <input type="checkbox"/> semi-monthly <input type="checkbox"/> bi-weekly	<input type="checkbox"/> monthly <input type="checkbox"/> weekly <input type="checkbox"/> semi-monthly <input type="checkbox"/> bi-weekly
Gross per month	\$ _____	\$ _____
	Job #1	Job #1
Federal Income Tax	\$ _____	\$ _____
Medicare	\$ _____	\$ _____
Social Security	\$ _____	\$ _____
State Income Tax	\$ _____	\$ _____
Mandatory contributions for retirement plans	\$ _____	\$ _____
Voluntary contributions for retirement plans	\$ _____	\$ _____
Required repayments of retirement fund loans	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Domestic support obligations	\$ _____	\$ _____
Union dues	\$ _____	\$ _____
Other deductions. Specify: (Explain in detail)	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

	Debtor 1	Debtor 2 or non filing spouse
Income from Other Sources		
Net income from operating a business, profession, or farm (Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.)	\$ _____	\$ _____
Rental Property	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____

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Family support payments (Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.)

\$ _____ \$ _____

Unemployment compensation

\$ _____ \$ _____

Social Security

\$ _____ \$ _____

Other government assistance (Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)

\$ _____ \$ _____

Pension or Retirement income

\$ _____ \$ _____

Other Monthly Income

\$ _____ \$ _____

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

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

\$ _____ \$ _____

Please describe any anticipated changes in household income during the next 12 months.

Monthly Net Income: \$ _____

Monthly Net Income: \$ _____

TOTAL MONTHLY HOUSEHOLD INCOME: \$ _____

Please Initial: Debtor 1 _____

Debtor 2 _____

Your Monthly Expenses

For variable expenses, figure how much you typically spend in a year and divide by twelve. Medical expenses should not include insurance premiums. Do not include any expenses that are deducted from your pay. If home insurance and property taxes are included in your mortgage payment, do not list them separately.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet.

Residence:

Mortgage/Rent	\$	Includes taxes and insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No. If No, specify amounts below.
Property Tax	\$	
Insurance on residence	\$	If you have renter's insurance, include it here.
Home Maintenance		
H.O.A/Condo Dues	\$	Any homeowner's association dues
Home Equity Loans, etc.		
Utilities:		
Electricity	\$	
Gas	\$	
Water/Sewer	\$	
Cable T.V.	\$	
Internet	\$	
Telephone		
Home	\$	
Mobile	\$	
Pager	\$	
Other	\$	Describe: _____
Food/housekeeping supplies	\$	
Childcare, children's education	\$	
Clothing/Laundry/Dry Cleaning	\$	
Medical/Dental		
Medical	\$	Do not include monthly insurance premiums or items deducted from your pay. Regular doctor visits or other regular services paid out of pocket.
Dental	\$	Regular dental visits or payments paid out of pocket.
Prescriptions	\$	
Transportation	\$	Fuel, oil, registration, annual maintenance, etc. Not vehicle payments.
Recreation	\$	Clubs, entertainment, newspapers, magazines, etc.
Charity	\$	Do not include items deducted from your paycheck.
Insurance		
Life	\$	Do not include if these payments are deducted from your paycheck.
Health	\$	Do not list deposits for Health Savings Accounts. Please see next page.
Auto	\$	
Other	\$	<input type="checkbox"/> Check this box if you used the back or attached additional pages.

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Taxes Do not include taxes deducted from your pay or included in mortgage payments.
Specify _____

Other Taxes Do not include taxes deducted from your pay or included in mortgage payments.
Specify _____

Instalments	
Auto 1	\$
Auto 2	\$
Other	\$
Other	\$
Alimony, Support	\$
Other Support	\$
Business	\$
SUB-TOTAL	\$

Check this box if you used the back or attached additional pages.

Check this box if you used the back or attached additional pages.

Alimony, maintenance, and support paid to others.

Support of **dependents not** living in your home (for college see next page).

Please Initial: Debtor 1 _____

Debtor 2 _____

Other Household Expenses
(may be out of the ordinary)

Do not enter amounts for items already deducted from your paycheck or listed above. Again, for yearly or semi-annual expenses, please enter the monthly average.

Higher Education

College Tuition	\$	For: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent
College Expenses	\$	For: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent
College Savings Plan	\$	<input type="checkbox"/> Personal or <input type="checkbox"/> State sponsored savings plans?
Private Schooling	\$	
Special Needs	\$	Education for Special Needs children at home or living elsewhere
HSA	\$	Health Savings Account payments.
Land Maintenance	\$	Please enter the total amount necessary to maintain any land you own. (Examples include brush clearing, well maintenance, fencing, dusting, etc.)
Land Taxes	\$	Taxes on land other than your homestead.
Septic	\$	Maintenance and repair of any septic system(s).
Bldg. Maintenance	\$	Maintenance of buildings/structures you own that are not your homestead.
Farming Vehicles	\$	Maintenance and repair of any farming vehicles.
Farming Equip	\$	Tools and equipment repaired or purchased.
Other	\$	
Specify:	\$	

SUB-TOTAL..... \$

GRAND TOTAL \$

Total of "Monthly Expenses" and "Other Household Expenses"

Check here if the back of this form is used, or additional pages attached.

Business Income & Expenses

Please enter your business income and expenses below. If you have a detailed statement, please submit that instead. Use a separate sheet if additional space is needed.

Other	\$	Specify:
-------	----	----------

A. Gross Business Income for Previous 12 Months

Previous Income... \$

B. Gross Monthly Income

Current Income..... \$

TOTAL INCOME.... \$

C. Estimated Average Future Monthly Expenses

Payroll.....	\$	
Payroll Taxes.....	\$	
Unemployment Tax	\$	
Worker's Comp.....	\$	
Other Taxes.....	\$	

Specify:

Inventory.....	\$	Inventory purchases
Consumables.....	\$	Feed, fertilizer, food, etc.
Rent/Lease.....	\$	
Utilities.....	\$	
Supplies.....	\$	
Maintenance.....	\$	Average your yearly expenses on maintenance and repairs
Vehicle Expenses..	\$	Fuel, oil, registration, annual maintenance, etc.
Entertainment.....	\$	Travel, food, hotel, flight, etc.
Equipment Rental..	\$	
Fees.....	\$	Any professional/business fees.
Insurance.....	\$	
Employee Benefits	\$	
Debt Payments		
Specify:	\$	
Other Expenses.....		Enter the total amount here. Use the back or additional paper if needed.
Specify:	\$	
Other Expenses.....		Enter the total amount here. Use the back or additional paper if needed.
	\$	
	\$	
TOTAL	\$	

Check here if the back of this form is used, or if additional pages are attached.

Statement of Financial Affairs

ALL QUESTIONS ARE TO BE ANSWERED COMPLETELY AND HONESTLY. Intentionally omitting or giving false information may be a punishable felony. Further, filing false documents is grounds for the Court to deny a discharge, meaning that your creditors can still pursue you.

If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form number. Answer every question.

EACH QUESTION MUST BE ANSWERED. IF THE ANSWER TO ANY QUESTION IS "NONE" OR THE QUESTION IS NOT APPLICABLE, WRITE "NONE" OR "NOT APPLICABLE" IN THE ANSWER BOX.

Information about Spouses.

Spouses filing jointly should fill out a single statement on which the information for both spouses is combined.

If the case is to be filed under **chapter 12** or **chapter 13**, a married client must furnish information for both spouses whether or not the spouse also files, unless the spouses are separated and the absent spouse does not join in filing.

Business Clients.

An individual client engaged in business as a sole proprietor, partner, family farmer or self-employed professional, should provide the information requested on this statement concerning all activities as well as the individual's personal affairs.

All questions **MUST** be completed for all cases.

If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

You. "You" means you, the client. If both husband and wife file, "**you**" includes both of you. If only one spouse files, "**you**" may include the non-filing spouse – ***please read the instructions for the question.*** If you own an interest in a corporation, "**you**" does not include the corporation.

In business. A client is "**in business**" for the purpose of this form if the client is a corporation or partnership. An individual client is "in business" for the purpose of this form if the client is or has been, within the two years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or person in control of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or self-employed.

Insider. The term "**insider**" (or *payee*) includes, but is not limited to: relatives of the client; general partners of the client and their relatives; corporations of which the client is an officer, director, or person in control; officers, directors, and any person in control of a corporate client and their relatives; affiliates of the client and insiders of such affiliates; any managing agent of the client. 11 U.S.C. § 101.

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No.
- Yes. Fill in the details.

Job #1	Debtor 1	Gross income	Debtor 2	Gross income
Describe:	Sources of income Check all that apply	(before deductions and exclusions)	Sources of income Check all that apply	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
For last calendar year:	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
(January 1 to December 31, _____)	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
YYYY				
For calendar year before that:	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
(January 1 to December 31, _____)	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
YYYY				

Job #2	Debtor 1	Gross income	Debtor 2	Gross income
Describe:	Sources of income Check all that apply	(before deductions and exclusions)	Sources of income Check all that apply	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
For last calendar year :	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
(January 1 to December 31, _____)	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
YYYY				
For calendar year before that:	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$ _____
(January 1 to December 31, _____)	<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
YYYY				

No.
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

			Dates of payment	Total amount paid	Amount you still owe	Was the payment for...
				\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's name						
Number	Street					
City	State	ZIP Code				

Creditor's name				\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number	Street					
City	State	ZIP Code				

Creditor's name				\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number	Street					
City	State	ZIP Code				

Added additional sheets (Please attach)

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No.
 Yes. List all payments to an insider.

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

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

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	payment	paid	owe	
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

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

Include payments on debts guaranteed or cosigned by an insider.

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

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

Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No.
 Yes. Fill in details

Please Initial: Debtor 1 _____ Debtor 2 _____

Nature of case	Court or agency	Status of case
Case title _____ _____	Court name _____	<input type="checkbox"/> Pending
Case number _____ _____	Number Street _____	<input type="checkbox"/> On appeal
	City State ZIP Code _____	<input type="checkbox"/> Concluded
Case title _____ _____	Court name _____	<input type="checkbox"/> Pending
Case number _____ _____	Number Street _____	<input type="checkbox"/> On appeal
	City State ZIP Code _____	<input type="checkbox"/> Concluded

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

Check all that apply and fill in the details below.

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

	Describe the property	Date	Value of the property
Creditor's Name _____ Number Street _____ City State ZIP Code _____			\$ _____
	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized or levied.		
Creditor's Name _____ Number Street _____ City State ZIP Code _____			\$ _____
	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized or levied.		

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

- No.
- Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name _____ Number Street _____ City State ZIP Code _____			\$ _____
	Last 4 digits of account number _____		

Part 5: List Certain Gifts and Contributions

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

- No.
 Yes. Fill in details

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

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

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

- No.
 Yes. Fill in details for each gift or contribution.

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

Part 6: List Certain Gifts and Contributions

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

- No.
 Yes. Fill in details

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

Part 7: List Certain Gifts and Contributions

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- No.

Please Initial: Debtor 1 _____ Debtor 2 _____

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

Yes. Fill in details.

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

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

Please Initial: Debtor 1 _____

Debtor 2 _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- No.
- Yes. Fill in details.

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

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- No.
- Yes. Fill in details.

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

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

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

- No.
- Yes. Fill in details.

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

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

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No.
- Yes. Fill in details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution _____ _____ Number Street _____ City State ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution _____ _____ Number Street _____ City State ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

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

- No.
- Yes. Fill in details

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution _____ _____ Number Street _____ City State ZIP Code _____	Name _____ Number Street _____ City State ZIP Code _____		<input type="checkbox"/> No <input type="checkbox"/> Yes

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

- No.

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

Yes. Fill in details

Who else had access to it?			Describe the contents			Do you still have it?
Name of Storage Facility			Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street			Number Street			
City State ZIP Code			City State ZIP Code			

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

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

No.
 Yes. Fill in details

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

Part 10: Give Details About Environmental Information

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

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

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

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

No.
 Yes. Fill in details

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

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

No.

Please Initial: Debtor 1 _____ Debtor 2 _____

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

Yes. Fill in details

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

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

No.

Yes. Fill in details below.

Court or agency			Nature of the case	Status of the case
Case title				<input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Concluded
Court Name				
Number	Street			
Case Number	City	State	ZIP Code	

Please Initial: Debtor 1 _____

Debtor 2 _____

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

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

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12. An owner of at least 5% of the voting or equity securities of a corporation
- Yes. Check all that apply above and fill in the details below for each business.

Business Name _____ Number Street _____ City State ZIP Code _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
		EIN - : _____
	Name of accountant or bookkeeper	Date business existed
		From To m _____
	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
Business Name _____ Number Street _____ City State ZIP Code _____		EIN - : _____
	Name of accountant or bookkeeper	Date business existed
		From To m _____
	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
Business Name _____ Number Street _____ City State ZIP Code _____		EIN - : _____
	Name of accountant or bookkeeper	Date business existed
		From To m _____

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

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

Firm Name: Bruce & Lehman, LLC Phone: (316) 264-8000 Fax: (316) 267-4488

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

x	_____	x	_____
	Signature of Debtor 1		Signature of Debtor 2
	_____		_____
	Date		Date

Please Initial: Debtor 1 _____ Debtor 2 _____

Fee Disclosure
(Attorney and Staff use only)

<input type="checkbox"/> FIXED FEE or <input type="checkbox"/> HOURLY	
(If hourly, enter estimated total fees below)	
Total Fee Amount	\$
Amount Paid	\$
Balance Due	\$

Source of Compensation PAID	<input type="checkbox"/> Debtor 1 <input type="checkbox"/> Other (Specify)

Source of Compensation TO BE PAID	<input type="checkbox"/> Debtor 1 <input type="checkbox"/> Other (Specify)

Included/Excluded	
No sharing of compensation, EXCEPT	
Legal Services INCLUDED in Fee, or <input type="checkbox"/> Use defaults	
	<input type="checkbox"/> a. Analysis of debtor's financial situation... <input type="checkbox"/> b. Preparation and filing of any petitions, schedules, ... <input type="checkbox"/> c. Representation of the debtor at the meeting of creditors... <input type="checkbox"/> d. Representation of the debtor in adversary proceedings... <input type="checkbox"/> e. Other:
The Fee Does Not Include the Following Services, or <input type="checkbox"/> Use defaults	

<input type="checkbox"/> Exclude from schedules	<input type="checkbox"/> Add to creditor list
<input type="checkbox"/> Exclude from matrix	<input type="checkbox"/> Add to SOFA question #9

Designated Attorney: _____

For staff use only

Exemption Scheme to use:	<input type="checkbox"/> State	<input type="checkbox"/> Federal (if applicable)
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Remember, BankruptcyPRO allows state and federal exemptions to be applied at the same time (if your state allows the use of federal bankruptcy exemptions) so that the program can calculate and present both options. Defaults for each property category can also be set.