

Advocate Law Office
Uptown Business Center
3009 Holmes Avenue South
Minneapolis, MN 55408-2628
612.825.8880

CLIENT INFORMATION WORKSHEETS

DEBTOR

JOINT DEBTOR

FULL NAME: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

COUNTY: _____

HOME PHONE: _____

WORK PHONE: _____

FAX (if available) _____

SOC. SEC. NO.: _____

OTHER TAX IDS: _____

What other personal or business names have you used in the last six (6) years?

PRIOR BANKRUPTCIES: If you have previously tiled a bankruptcy petition, please list the case number, date, and the location where you tiled on the lines following.

PENDING BANKRUPTCIES: If any immediate family member or business partner has a bankruptcy pending, please list the case number, name of debtor, relation to you, date and location where tiled, and the bankruptcy judge on the lines following.

WORKSHEET: YOUR PROPERTY

Your Property Provide detailed description What is it? Where is it?	Who Owns It? H - Husband W - Wife J - Joint c - community	Market Value of Property	Your Ownership Share (%,\$)	Value of Liens (claims against property)	Amount of Equity	Exempt? If so, put exemption amount; if not write 'No'.
Real Property is land and things permanently attached to land. Included are unimproved land, vacation cabins, condominiums, duplexes, rental property, business property, mobile home park spaces, agricultural land, airplane hangars, and any other buildings permanently attached to land. It also includes property you are entitled to by a trust and all property in which you have any legal, equitable, or future interest. If you are in a community property state, your spouse's real estate is also owned by you. (All leases and time shares should be listed on the worksheet for Schedule G.)						
REAL ESTATE (Schedule A) (Attach Legal Desc. and Location)						
PERSONAL PROPERTY (Schedule B) 1. Cash on hand (indicate source)						
2. Deposits of money (indicate source)						
3. Security deposits						

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Your Property Provide detailed description What is it? Where is it?	Who Owns It? H - Husband W - Wife J - Joint C - community	Market Value of Property	Your Ownership Share (% , \$)	Value of Liens (claims against property)	Amount of Equity	Exempt' ? If so, put exemption amount, if not write "No".
4. Household goods, supplies and furnishings						
5. Books, pictures, art objects; stamp, coin, and other collections						
6. Wearing apparel						
7. Jewelry						
8. Firearms, sports equipment and other hobby equipment						
9. Interests in insurance policies						

WORKSHEET: YOUR PROPERTY

<p align="center">Your Property Provide detailed description What is it? Where is it?</p>	<p align="center">Who Owns It? H - Husband W - Wife J - Joint c - community</p>	<p align="center">Market Value of Property</p>	<p align="center">Your Ownership Share (% , \$)</p>	<p align="center">Value of Liens (claims against property)</p>	<p align="center">Amount of Equity</p>	<p align="center">Exempt? If so, put exemption amount; if not write "No".</p>
10. Annuities						
11. Pension or profit-sharing plans						
12. Stock and interests in incorporated and unincorporated companies						
13. Interests in Partnerships						
14. Government and corporate bonds and other negotiable and non-negotiable instruments						
15. Accounts receivable						
16. Family support (to which you are or may be entitled)						

WORKSHEET: YOUR PROPERTY

<p align="center">Your Property Provide detailed description What is it? Where is it?</p>	<p align="center">Who Owns It? H - Husband W - Wife J - Joint c - community</p>	<p align="center">Market Value of Property</p>	<p align="center">Your Ownership Share (% , \$)</p>	<p align="center">Value of Liens (claims against property)</p>	<p align="center">Amount of Equity</p>	<p align="center">Exempt? If so, put exemption amount; if not write "No".</p>
17. Other liquidated debts owing debtor, including tax refunds						
18. Equitable and future interests, life estates and rights or powers						
19. Interest in an estate of a debtor, including tax refunds						
20. Other contingent and unliquidated claims						
21. Patents, copyrights and other intellectual property						
22. Licenses, franchises and other general intangibles						
23. Automobiles, trucks, trailers and other vehicles						
24. Boats, motors, and accessories						

WORKSHEET: YOUR PROPERTY

Your Property Provide detailed description What is it? Where is it?	Who Owns It? H - Husband W - Wife J - Joint c - Community	Market Value of Property	Your Ownership Share (%,\$)	Value of Liens (claims against property)	Amount of Equity	Exempt? If so, put exemption amount; if not write "No".
25. Aircraft and accessories						
26. Office equipment furnishings and supplies						
27. Machinery, fixtures, equipment and supplies						
28. Inventory						
29. Livestock, poultry and other animals						
30. Crops						
31. Farming equipment and implements						
32. Farm supplies, chemicals and feed						
33. Other personal property						

WORKSHEET: YOUR DEBTS - Secured and Priority

Creditors' Name and Address	Account No. and Date Incurred	Describe Debt	Who is Liable For Debt? H - Husband W - Wife J - Joint	Balance Owed	Others Involved Name and Address (i.e. Collection Agency, Codebtor, etc.)
<p>Secured debts are car loans, home loans, home equity loans, second mortgages, or any other loans where property is pledged as security. All other types of debt are unsecured.</p>					
Mortgage(s) on Principal Res.					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
Automobile Loans					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
List Other Secured Debts Below:					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
List priority claims below:					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
FEDERAL TAXES	Desc. Tax Due				<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
STATE TAXES	Desc. Tax Due				<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other

WORKSHEET: YOUR DEBTS - Unsecured

Creditors' Name and Address	Account No. and Date Incurred	Describe Debt	Who is Liable For Debt? H - Husband W - Wife J - Joint	Balance Owed	Others Involved Name and Address (i.e. Collection Agency, Codebtor, etc.)
<p>Secured debts are car loans, home loans, home equity loans, second mortgages, or any other loans where property is pledged as security. All other types of debt are unsecured.</p>					
List all Unsecured Debts Below:					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
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					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other
					<input type="checkbox"/> Collection Agency <input type="checkbox"/> Codebtor <input type="checkbox"/> Other

CLIENT WORKSHEET

LEASES OR CONTRACTS: Are you a party to any leases or contracts? If **yes**, list the parties involved and their addresses. If you owe money on these contracts, they should be listed on the Schedules above.

DEBTOR

JOINT DEBTOR

MARITAL STATUS:

AGE:

OCCUPATION:

LENGTH OF EMP.:

EMPLOYER NAME:

EMPLOYER ADDRESS:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

DEPENDENTS

NAME:

AGE:

RELATIONSHIP:

NAME:

AGE:

RELATIONSHIP:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WORKSHEET: YOUR INCOME

	DEBTOR	JOINT DEBTOR
Current monthly gross wages, salary, commissions (Pro-rate if not paid monthly)		
Estimated monthly overtime		
Payroll Taxes and Social Security Deducted		
Insurance Deducted		
Union dues Deducted		
Other payroll deductions- specify		
Regular monthly income form business, profession, or farm (Attach a detail statement)		
Monthly income from real property		
Monthly interest and dividends		
Alimony, maintenance, or support payments (amount received monthly for debtor's or debtor's dependents' use)		
Social Security or government assistance		
Pension or retirement		
Other monthly income		
Describe any increase or decrease of more than 10% in any previous category anticipated to occur in the year following this tiling.		

WORKSHEET: YOUR EXPENSES

	DEBTOR(S)
Rent or home mortgage payment Does this include real estate taxes? Does this include property insurance?	
Electricity and heating fuel (average monthly)	
Water and sewer (average monthly)	
Telephone (average monthly)	
Other utilities (average monthly)	
Home maintenance (repairs and upkeep)	
Food	
Clothing	
Laundry and dry cleaning	
Medical and dental expenses	
Transportation (not including car payments)	
Recreation, clubs and entertainment, newspapers, etc.	
Charitable contributions	
Homeowner's or renter's insurance	
Life insurance	
Health insurance	
Auto insurance	

WORKSHEET: YOUR EXPENSES

	DEBTOR(S)
Other insurance - specify	
Taxes not deducted from wages or in home mortgage payments	
Installment auto payments	
Other installment payments not included in Chapter 13 Plan	
Alimony, maintenance, and support paid to others	
Payments for dependents not living at your home	
Operation expenses of business, profession, or farm	
Other expenses	

Form 7: Statement of Financial Affairs

1. Income **from** employment or operation of business.
Enter each income source for the past two years. Specify the **amount** of income and the fiscal year.

Sources (name and address)	Amount	Fiscal Period

2. Income other than from employment or operation of business.
Enter sources of any other income during the past two years. Specify the **amount** of income and the fiscal year.

Sources (name and address)	Amount	Fiscal Period

- 3a. List payments made to any creditor totalling more than \$600.00 during the last 90 days.

Creditors (name and address)	Dates of Payments	Amount Paid	Amount Still owing

- 3b. List payments made to insider creditors during the last year.

Creditors (name and address)	Dates of Payments	Amount Paid	Amount Still owing

- 4a. Were you sued or did you sue anybody last year (12 months)? _____

If yes, list the following on back of this sheet: caption of suit, case number, nature of proceeding, court and location, status/disposition.

4b. List any property garnished, attached or seized during the last year by a creditor,

Creditor (name and address)	Date of seizure	Description and value of property

5. List any repossessions, foreclosures and **voluntary** returns during the last year.

Creditor (name and address)	Date of repossession	Description and value of property

6a. Describe any assignment of property for the benefit of creditors made within the last 120 days.

On the back of this sheet list the name and address of assignee, date of assignment and terms of assignment or settlement.

6b. List all property which has been in the hands of a custodian receiver, or court-appointed **official** during the past year.

On the back of this sheet list the name and address of custodian, name and location of court, case title and number, date of order, description and value of property.

7. List all gifts or charitable contributions made during the last year except ordinary and usual **gifts** to family members totaling less than \$200 per family member and \$100 per charitable recipient.

Recipient (name and address)	Relationship (if any)	Date of gift	Description and value of gift

8. List all losses from fire, theft, other casualty or gambling during the past year.

On the back of this sheet list the description and value of property, circumstance of loss, if loss was covered by insurance (give particulars) and date of loss.

9. List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy during the past year.

Payee (name and address)	Date of Payment, Payor	Amount Paid or Value of property transferred.

10. List all other property, other than property transferred in the ordinary course of the business or financial **affairs** of the debtor, transferred either absolutely or as security during the past year to creditor or family member.

Transferee & relationship (name and address)	Date	Describe property transferred, and value received

11. List all **financial** accounts and instruments held by or for the benefit of the debtor which were closed, sold or otherwise transferred in the past year. Include checking, savings, or other **financial** accounts, CDs, shares and share accounts held in banks, credit unions, pension funds, brokerage houses, etc.

Institution (name and address)	Acct type & number Amt of Final Balance	Amount & date of sale or closing

12. List each safe deposit or other box or depository in which you have had valuables within the past year.

Institution (name and address)	Who has access? (names and address)	Description of contents	Date of transfer or surrender

13. List all **setoffs** (money taken from an account to repay a loan at the same bank as where your money has been deposited) made by any creditor, including a bank, against a debt of the debtor within the past 90 days.

Creditor (name and address)	Date of setoff	Amount of setoff

14. List all property OWNED by another person that the debtor (you or you and your spouse) holds or controls.

Owner (name and address)	Description & value of property	Location of property

15. If you have moved within the last TWO years, list all premises occupied and vacated during that period.

Address	Name used	Dates of occupancy