## CLIENT BANKRUPTCY CHAPTER 7 INDIVIDUAL

**Fehr Law Office** 205 Green Street, Onalaska, WI 54650, 608-783-3647

# **INFORMATION WORKSHEET INSTRUCTIONS**

#### WARNING: DO NOT DO ANYTHING THAT WOULD INCREASE OR DECREASE YOUR DEBT

- DO NOT get ANY new debt; DO NOT USE ANY credit card debt
- DO NOT close or cash in 401k or other retirement plans, insurance policies or any bank accounts
- DO NOT pay more than \$199.00 to any one creditor in any given month, including relatives & friends (except normal house, car and other secured debt payments)
- DO Talk to your attorney before doing any of these things!!

#### **WARNING:** BRING THE FOLLOWING IN WITH THESE WORKSHEETS:

- Photocopy of each client's <u>DRIVER'S LICENSE & SOCIAL SECURITY CARD</u>
- Copy of the <u>Certificate of Credit Counseling</u> for <u>EACH DEBTOR</u>
- ALL TITLES for ALL titled property (autos, mobile homes, snowmobiles, boats, etc.).
- ALL RECORDED MORTGAGES for <u>ALL</u> Real Property (homes, land, vacation homes, cabins, time shares, etc.).
- PAY STUBS FOR THE 6 MONTH PERIOD prior to filing your case for EACH CURRENT JOB.
- W-2s for <u>ALL EMPLOYERS</u> for whom you worked for the <u>PAST TWO YEARS</u>.
- Copy of <u>LAST YEAR'S TAX RETURN</u>; If you did not file a tax return for income received last year, you must do so before you can file for bankruptcy.
- Copy of the <u>Certificate of Financial Management Course</u> BY THE DATE OF THE CREDITORS MEETING

### WARNING: WHEN FILLING OUT THE WORKSHEET PAGES SUPPLY THE FOLLOWING:

## FOR EVERY BLANK PROVIDE ONE OF THE FOLLOWING THREE ANSWERS:

#### A. ALL THE INFO REQUESTED - FULLY & COMPLETELY

#### OR

B. <u>N/A</u> if it does <u>N</u>ot <u>A</u>pply to you

OR

C. <u>??</u> if you do not know what is being requested; in this case, please call Dan at 608-783-3647

# WARNING: FEDERAL LAW REQUIRES THAT ALL assets (everything you have, own, hold title to, is yours) MUST be listed

- WARNING: FEDERAL LAW REQUIRES THAT ANY AND ALL debts to anyone including family and friends MUST be listed (This includes debts you plan to keep & repay)
  - For EVERYONE you owe money to, supply the following: <u>COMPLETE</u> names, <u>CORRESPONDENCE ADDRESSES</u>, <u>ACCOUNT NUMBERS</u> and amounts owed, including for government organizations to which you owe money.
  - <sup>(27)</sup> Indicate which <u>secured DEBTS</u> (house, car, boat, etc.) you want to <u>REAFFIRM</u> (keep & repay)

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# **INFORMATION WORKSHEET INSTRUCTIONS**

- You can get a <u>FREE</u> credit report <u>once a year</u> by going to the following site on the internet: <u>https://www.annualcreditreport.com</u>. Compare your credit report with your records to make sure you list all your creditors accurately and completely.
- When listing creditors' addresses (ANYONE you owe money to) be sure to use the <u>CORRESPONDENCE</u> <u>ADDRESS</u> (see examples below) <u>NOT</u> the payment address. Otherwise, the proper department of the creditor may not receive the notice from the court telling them that you filed.

Some creditors list their "correspondence address" on the **front of the bill** as show below. Look for a section about "Written Inquiries," "Billing Rights," "Errors" or "Questions."

Any Credit Union Credit Card Account	
Account Inquiries Customer Service: (800) 000-000	
Please Direct Written Inquiries to:	
CUSTOMER SERVICE PO BOX 00000 TAMPA, FL 33630	
777777	

This is the Correspondence address

Some creditors list their "<u>correspondence address</u>" on the **back of the bill** as show below. Look for a section about "<u>Written Inquiries</u>," "<u>Billing Rights</u>," "<u>Errors</u>" or "<u>Questions</u>."

BILLING RIGHTS SUMMARY IN CASE OF ERROS OR QUESTIONS ABOUT YOUR BILL

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us as soon as possible on a separate sheet at: **Credit Card Billing Disputes**, PO Box 0000, Pleasanton, CA 94566

# \*\*\*\*\*

This is the Correspondence address

When your worksheets and other information pertaining to your bankruptcy filing are ready, <u>please call Dan at 608-783-3647</u> and schedule an appointment with him so he can make sure we have everything we need to effectively file your case.

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# **INFORMATION WORKSHEET INSTRUCTIONS**

## SAMPLE OF A MORTGAGE (First Page)

Below is a sample of what a **<u>RECORDED MORTGAGE</u>** will look like.

It will say **MORTGAGE** at the top of the first page and will have a recording stamp in the upper right corner as shown below. We need:

1) the first page;

2) the page(s) with the dollar amount of the mortgage (what you owe on your house)

3) the page with the Legal Description on it which looks something like this:

Lots 7 and 8 in Block 5 of Smith Colony Park Addition to the City of Somewhere, La Crosse County, Wisconsin.

### MORTGAGE

DOCUMENT NUMBER

NAME & RETURN ADDRESS

LA CROSSE COUNTY WI REGISTER OF DEEDS DEBORAH J. FLOCK

RECORDED ON 07-01-2001 AT 11:03 AM REC. FEE: 38.00 TRANSFER FEE:

PAGES: 15

PARCELL IDENTIFIER NUMBER

DEFINITIONS

# CLIENT BANKRUPTCY CHAPTER 7 INDIVIDUAL INFORMATION WORKSHEETS

Fehr Law Office

205 Green Street, Onalaska, WI 54650, 608-783-3647

	PERSONAL I	NFORMA	ΓΙΟΝ	
	Y <u>COMPLETE</u> INFO ON LUDING <u>FULL</u> FIRST, <u>N</u>			
	DEBTOR (husband)		JOINT D	DEBTOR (wife)
FULL NAME:	First <u><b>FULL</b></u> Middle	Last	First <u>FU</u>	J <u>LL</u> Middle Last
STREET ADDRESS:				
MAILING ADDRESS:				
CITY, STATE, ZIP				
COUNTY:				
500. 5EC. 110				
What <b>OTHER</b> <u>PERSONAL</u> (	DR <u>BUSINESS</u> NAMES (maiden nar	nes, etc.) have you	u used in the last $\underline{\mathbf{E}}$	<u>IGHT</u> (8) years?
	N OF PAGE 11 OF THES			
<b>MADATORY FOR CO</b> TO FILE FOR BANK	<u>OMPLETION OF THE MI</u> RUPTCV	EANS TEST	TO DETERN	<u>IINE ELIGIBILITY</u>
WARNING: IT IS A FEDE FILED BY YOU OR PEND	RAL CRIME (Fraud) TO CONC PING AGAINST YOU WITHIN T S: If a bankruptcy petition has b past 8 years, please list below	THE <u>EIGHT (8)</u> een previously f	<u>YEARS</u> PRIOR	TO FILING THIS CASE! AGAINST you within the
	etc.), date filed and the case nu <b>NONE</b> write "NONE."	umber and wheth	her the case (debt	s) was discharged. If
Location of Filing	Date Filed	Case	Number	Discharged?
PENDING BANKRUPTC	<b>IES:</b> If there are <b>any bankruptcy</b> spouse or your spouse's bus district where filed, date file	iness, please list	below the name	of debtor, relation to you,
Debtor	Relationship	District	Date	Case Number

#### SCHEDULE A: REAL ESTATE PROPERTY & SCHEDULE B: PERSONAL PROPERTY NOTE: <u>LIST ALL REAL ESTATE OWNED BY YOU</u> even if it is with others (relatives, friends, business partners, etc)

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.)

# A <u>RECORDED MORTGAGE</u> is needed for each real property as well as a <u>RECENT APPRAISAL</u>. A record mortgage will be on file at the Register of Deeds office in the county in which the property is located.

SCHEDULE A: REAL ESTATE Provide detailed description:	Who owns? Husb, wife,	Market Value If you sold it	Loan Amounts If you have a loan	Reaff Keep p	roperty	Office Use Only
TYPE of property AND address         Name AND Address of any mortgagors         List Mobile Homes on Schedule B	joint, co-own with others	<u>From appraisal</u> <u>OR Tax Bill</u>	If you have a loan Also list 2 <sup>nd</sup> Mort.	& repay		Exemptions?
List Mobile Homes on Schedule B						

SCHEDULE B: PERSONAL PROPERTY	<b>Replacement Value</b> If a merchant sold it	Office Use Only Exemptions?
1. Cash on hand <u>AT TIME OF FILING</u> , IF ANY		
2. Bank AccountsAccount NumberBank Name & AddressType of Account (checking,)Last 4 numbers		
3. Security Deposits (deposit on apartment, phone deposit, utility company, etc. Provide		
name and address of person/company who is holding the deposit)		
4. Household furnishings, supplies & goods		
List major items here (couch, bedroom set, major appliances, etc. including audio, video and computer equipment) Put <b>Total Value</b> in next column >>		
5. Books, pictures, art objects, stamp/coin/other collections of significant value		
r, r		
6. Clothing (list as # of adult & # of children's wardrobes)		
Adult wardrobes List <b>TOTAL</b> value in next column>>		
Children's wardrobes		
7. Jewelry		
8. Firearms, sports, photography & other hobby equipment		

SCHEDULE B: PERSONAL PROPERTY	Replacement Value	Office Use Only
Provide detailed description	If a merchant sold it	Exemptions?
9. Insurance policies (indicate type: Term Life, Whole Life, Universal Life) <u>Company</u> <u>Type</u> <u>Death Benefit (\$)</u>	Cash value if any (Whole, Universal Life)	
10. Annuities		
11. Interests in an education IRA as defined in 26 USC § 530(b)(1)		
12. Interests in Pension or profit-sharing plans		
13. Stock and interests in incorporated and unincorporated companies		
14. Interests in partnerships/joint ventures		
15. Government and corporate bonds and other negotiable and non-negotiable instruments		
16. Accounts receivable		
17. Alimony/Family support (to which you are or may be entitled)		

SCHEDULE B: PERSONAL PROPERTY	Replacement Value	Office Use Only
Provide detailed description	If a merchant sold it	Exemptions?
18. Money you <u>WILL</u> be receiving <u>SOON</u> (money people owe you; tax refunds expected)		
19. Equitable & future interests in life estates & rights or powers		
20. Interest in the estate of a decedent		
21. Money <u>OWED</u> you that you will receive <u>EVENTUALLY</u> (incl. tax refunds)		
$\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i$		
22. Patents, copyrights & other intellectual property		
22. I atents, copyrights & other intellectual property		
23. Licenses, franchises & other general intangibles		
23. Elections, multimises et other general multiplotes		
24. Customer list or other compilation		

		Replacement	Loan Amounts	Reaffirm? Keep property		Office Use Only	
		Value If a merchant	If you have a loan	& repay		Exemptions?	
Provide detailed description		sold it		YES	NO		
25. Automobiles BE SURE TO PROVIDE: Year/Make/Model/SE/LE, etc.; ALSO indicate special features, like, A/C, power seats, sun roof, trim, wheels, towing package etc)	Mileage	Office Use Only Kelly Blue Book Value					
26. Boats, motors & accessories Year/length Brand							
27. Aircraft & accessories							
28. Office equipment, furnishings & supplies ( home equipment goes under # 4 above)	for business,						
29. Machinery, fixtures, equipment & supplies	\$						
Provide detailed description			Replacemen If a merchan				
30. Inventory							
31. Livestock, poultry & other animals							
32. <b>Crops</b> (growing or harvested)							
33. Farming equipment & implements							
34. Farm supplies, chemicals & feed							
35. Other property of ANY kind (not covered b	by Categories 1-2	34)					

#### SCHEDULE D: <u>SECURED</u> DEBTS

Creditors' Name/Full Address <u>USE CORRESPONDENCE</u> <u>ADDRESS</u> , NOT PAYMENT	Other agencies Or persons involved NAME & FULL ADDRESS (collect agencies, co-debtor, etc.)	Account # Date incurred	Describe Debt	Owner H: husb W: wife J: joint	Balance Owed
Mortgages (1 <sup>st</sup> /2 <sup>nd</sup> ) on Residences		FULL Acct #			
		Date debt made			
Mortgages (1 <sup>st</sup> /2 <sup>nd</sup> ) on Residences		FULL Acct #			
		Date debt made			
Automobile Loans		FULL Acct #			
		Date debt made	•		
Automobile Loans		FULL Acet #			
		Date debt made			
Real Estate Taxes		Parcel #			

#### SCHEDULE E: <u>PRIORITY</u> DEBTS (student loans, fines, <u>income</u> taxes)

Creditors' Name/Full Address USE CORRESPONDENCE ADDRESS, NOT PAYMENT	Other agencies Or persons involved NAME & FULL ADDRESS (collect agencies, co-debtor, etc.)	Account # Date incurred	Describe Debt	Owner H: husb W: wife J: joint	Balance Owed
		Acct # Date debt made			
		Acct # Date debt made			
		Acct # Date debt made			

SCHEDULE F: <u>UNSECURED</u> DEBT (Credit cards, other bills) <u>Use CORRESPONDENCE ADDRESS</u> where possible NOTE: When listing Collection Agencies, original creditor's FULL Name & address must also be supplied to ensure discharge of debt

Creditors' Name/Full Address USE CORRESPONDENCE ADDRESS, NOT PAYMENT	Other agencies Or persons involved NAME & FULL ADDRESS (collect agencies, co-debtor, etc.)	Account # And <u>FOR CREDIT CARDS</u> : provide last date used	Describe Debt	Owner H: husb W: wife J: joint	Balance Owed
		Acct #			
		Last date used:	_		
		Acct #			
		Last date used:	_		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	_		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		

#### SCHEDULE F: <u>UNSECURED</u> DEBT (Credit cards, other bills) <u>Use CORRESPONDENCE ADDRESS where possible</u> NOTE: When listing Collection Agencies, original creditor's FULL Name & address must also be supplied to ensure discharge of debt

Creditors' Name/Full Address USE CORRESPONDENCE ADDRESS, NOT PAYMENT	Other agencies Or persons involved NAME & FULL ADDRESS (collect agencies, co-debtor, etc.)	Account # And <u>FOR CREDIT CARDS</u> : Provide Last Date Used	Describe Debt	Owner H: husb W: wife J: joint	Balance Owed
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
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		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		
		Acct #			
		Last date used:	-		

Attach additional sheets for additional creditors; include all information as above

#### **SCHEDULE G: LEASES OR CONTRACTS**

List below any leases or contracts that are still current that you are a party to. Include residential, car and business leases and service or business contracts.

Nature/Description of contract	Date Contract Expires
-	Nature/Description of contract

#### **SCHEDULE H: CO-DEBTORS**

Name & Address of Co-Debtor	Debt on which this person is Co-Debtor

#### **SCHEDULE I: DEPENDENT & INCOME INFORMATION**

#### MARITAL STATUS

- $\Box$  Single
- □ Married
- □ Divorced
- □ Separated
- □ Widowed

#### **DEPENDENT INFORMATION**

<b>DEPENDENT'S NAME</b> (if you have primary placement or caregiver)	AGE	RELATIONSHIP

#### **EMPLOYMENT INFORMATION**

EMPLOYMENT INFO	<b>DEBTOR</b> (husband)	JOINT DEBTOR (wife)
Occupation		
Length of employment		
Employer's name		
Employer's <u>FULL</u> address		

#### **SCHEDULE I: MONTHLY INCOME INFORMATION**

Total Number of Dependents you can claim (Take from line 6d on 1040 tax return):

MO	MONTHLY INCOME <u>FOR LAST SIX MONTHS</u> (Please provide <u>EXACT AMOUNTS)</u>							
(husband)	ITEM	Current Month	Month 2	Month 3	Month 4	Month 5	Month 6	Office Use Only
qsnu	Income from employment							
	Overtime income from employment							
DEBTOR	Wage tax deductions (including Federal, State, social security & Medicare)							
DE	Health insurance premium deducted from wages							
	Union dues deducted from wages							
	Other payroll deductions (specify)							
	Income from <b>business, profession, farm</b> , etc (attach detailed statement)							
	Income from <b>real estate</b>							
	Income from interest or dividends							
	Income from alimony, maintenance or support payments							
	Income from Social Security or other government assistance							
	Income from <b>pension or retirement</b>							
	Other income not listed							

MO	<u>MONTHLY</u> INCOME <u>FOR LAST SIX MONTHS</u> (Please provide <u>EXACT AMOUNTS)</u>							
vife)	ITEM	Current Month	Month 2	Month 3	Month 4	Month 5	Month 6	Office Use Only
2 Z	Income from employment							
[O]	Overtime income from employment							
JOINT DEBTOR (wife)	Wage tax deductions (including Federal, State, social security & Medicare)							
	Health insurance premium deducted from wages							
	Union dues deducted from wages							
	Other payroll deductions (specify)							
	Income from <b>business</b> , <b>profession</b> , <b>farm</b> , etc (attach detailed statement)							
	Income from real estate							
	Income from interest or dividends							
	Income from alimony, maintenance or support payments							
	Income from Social Security or other government assistance							
	Income from <b>pension or retirement</b>							
	Other income not listed							

#### SCHEDULE J: MONTHLY EXPENSES

ITEM	DEBTOR	<b>JOINT DEBTOR</b> (If separate household)
MONTHLY       □ Rent       □ Mortgage payment         Includes property taxes       □ YES       □ NO         Includes property insurance       □ YES       □ NO		
MONTHLY electricity AND heating costs		
MONTHLY water & sewer		
MONTHLY telephone (including cell phone)		
MONTHLY other utilities (cable TV, etc.) Specify:		
MONTHLY home maintenance (repairs & upkeep)		
MONTHLY food purchases		
MONTHLY clothing purchases		
MONTHLY laundry & dry cleaning		
MONTHLY medical & dental expenses		
MONTHLY transportation costs (gas, oil, tires – average monthly)		
MONTHLY expenses for recreation, clubs, newspapers, etc.		
MONTHLY charitable contributions		
MONTHLY homeowner's or renter's insurance		
MONTHLY life insurance premiums paid not deducted from wages		
MONTHLY health insurance premiums paid not deducted from wages		
MONTHLY auto insurance premiums		
MONTHLY other insurance premiums Specify:		
<b>MONTHLY</b> taxes <b>not deducted from wages or included in mortgage payment</b> Specify Type:		
MONTHLY auto loan payments		
MONTHLY other installment payments: Specify which debts payments are for:		
MONTHLY payment of alimony, maintenance & support TO OTHERS		
<b>MONTHLY</b> payments for dependents not living at your home		
MONTHLY MANDATORY payroll deductions not already listed		
MONTHLY court-ordered payments not already listed		
<b><u>MONTHLY</u></b> education expense to maintain employment		
<b><u>MONTHLY</u></b> education expense for a physically/mentally challenged child		
MONTHLY childcare expense		
MONTHLY disability insurance expense if not listed above		
MONTHLY health savings account expense		
<b><u>MONTHLY</u></b> expense for the care of elderly, chronically ill or disabled family member		
MONTHLY expenses for protection from family violence		
MONTHLY expenses for education of children under age 18		
<b><u>MONTHLY</u></b> expenses for non-mandatory contributions to retirement funds (including loan repayment		
<b><u>MONTHLY</u></b> operation of business, profession or farm (attach statement)		
MONTHLY other expenses		

#### FORM 7: STATEMENT OF FINANCIAL AFFAIRS

1. <u>ANNUAL INCOME from employment</u> or operation of business <u>FOR THE PAST TWO FULL YEARS PLUS the Year-to-date amount for the current year</u>.

Name of Source	Husband/Wife	ANNUAL \$ Amount	Year

#### 2. <u>ANNUAL INCOME</u> from sources <u>OTHER THAN employment</u> FOR THE PAST TWO FULL YEARS PLUS the Year-to-<u>date amount for the current year</u>. (Unemployment, alimony, maintenance, support, retirement fund or insurance policy cash outs, etc.)

Name of Source	Husband/Wife	ANNUAL \$ Amount	Year

3a. If your debts are <u>primarily consumer debts</u> <u>LIST ALL PAYMENTS</u> on loans, installment purchases of goods or services, and other debts, <u>TOTALLING MORE THAN \$600 TO ANY CREDITOR</u> made during the 90 days just prior to filing this bankruptcy.

Creditor's Name & <u>COMPLETE</u> Address	Dates paid	Amount paid	Balance

#### 3b. If your debts are <u>primarily consumer debts</u> **LIST ALL PAYMENTS OR TRANSFERS TOTALLING MORE THAN \$5,000 TO ANY CREDITOR** made during the 90 days just prior to filing this bankruptcy.

Creditor's Name & <u>COMPLETE</u> Address	Dates paid	Amount paid	Balance

#### FORM 7: STATEMENT OF FINANCIAL AFFAIRS

3c. <u>LIST ALL PAYMENTS</u> made <u>within ONE YEAR</u> just prior to filing this bankruptcy to creditors who were "insiders." ("Insiders" include your relatives, your business partners and their relatives, your corporations, or your affiliates)

Creditor's Name & <u>COMPLETE</u> Address	Dates paid	Amount paid	Balance

4a. List all <u>LAW SUITS</u> against you or by you within the last 12 months just prior to filing this bankruptcy (attach separate sheet if necessary.

Suit Caption	Case #	Nature	Court & address	Status/disposition

4b. **DESCRIBE ANY PROPERTY** that has been garnished, attached or seized by any creditor during the past 12months just prior to filing this bankruptcy.

Creditor Name & <u>COMPLETE</u> Address	Date of Seizure	Property Description & Value

5. **LIST ALL PROPERTY** that has been repossessed, foreclosed on or voluntarily returned to a creditor during the past 12 months just prior to filing this bankruptcy.

Creditor Name & <u>COMPLETE</u> Address	Date of Reposs.	Property Description & Value

- 6a. Describe any assignment of property for the benefit of creditors made within the last 120 days. <u>On a separate sheet</u> list the name and address 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 a separate 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 <u>within the last year</u> just prior to filing this bankruptcy <u>except</u> ordinary and usual gifts to family members whose value is less than \$200 per family member and less than \$100 per charitable recipient.

Recipient's Name & <u>COMPLETE</u> Address	Relationship	Description/Value Of gift

- 8. List all losses from fire, theft, other casualty or gambling during the past year. On a separate 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 within the last year just prior to filing this bankruptcy.

Payee Name & <u>COMPLETE</u> Address	•	Amount Paid or Value of property transferred

10a. 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 **within the last two years** just prior to filing this bankruptcy to a creditor or family member (including sale of your property).

Transferee Name & <u>COMPLETE</u> Address & relationship	Date	Describe property transferred and value received

- 10b. List all property you transferred within 10 years just prior to filing this bankruptcy to a self-settled trust, or similar device of which you are the beneficiary.
- 11. List all **financial accounts and instruments** held by or for the benefit of the debtor which were **closed**, **sold or otherwise transferred** <u>within one year</u> just prior to filing this bankruptcy. Include checking, savings, or other financial accounts, CDs, shares and share accounts held in banks, credit unions, pension funds, brokerage houses, etc.

Institution Name & <u>COMPLETE</u> Address	Account type & No.	Date & Amount at closing

12. List each **safe deposit or other box or depository** in which you have had valuables within the past year just prior to filing this bankruptcy.

Institution Name & <u>COMPLETE</u> Address	Who has access? (Name & Address)	Describe contents	Date of transfer 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** just prior to filing this bankruptcy.

Creditor Name & <u>COMPLETE</u> 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.

Creditor Name & <u>COMPLETE</u> Address	Describe property	Location of property

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

Address	Name used	Dates of occupancy

16. If you reside or resided in Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin <u>within the last EIGHT years</u> just prior to filing this bankruptcy, identify the name of your spouse and of any former spouse who resides or resided with you.

Name			

# 17a. List the name and address of every site for which you have received notice in writing by a governmental unit that you be liable or potentially liable for under or in violation of an <u>Environmental Law</u>. Indicate the governmental unit, the date of the notice, and if known, the Environmental Law.

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

Name & address of governmental unit	Date of notice	Environmental Law

# 17b.List the name and address of every site for which you provided notice to a governmental unit of a release of <u>Hazardous</u> <u>Material</u>. Indicate the governmental unit, the date of the notice, and if known, the Environmental Law.

Site Name & <u>COMPLETE</u> Address	Name & address of governmental unit	Date of notice	Environmental Law

# 17c. List all judicial or administrative proceedings, including settlements or orders, under any <u>Environmental Law</u> with respect to which you are or were a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name & address of governmental unit	Docket No.	Status or Disposition

18a. If you are an individual, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates <u>of all businesses</u> in which you were an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or were a self-employed professional within the last six years, or in which you owned 5 percent or more of the voting or equity securities within the last six years.

If you are a partnership, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which you were a partner or owned 5 percent or more of the voting or equity securities within the last six years.

If you are a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the last six years.

Name	Taxpayer ID No.	Address	Name of business	Begin & End dates

18b. Identify any **business** listed above that is "single asset real estate."

Name	Address

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