

BANKRUPTCY WORKSHEET FOR INDIVIDUALS OR MARRIED COUPLES

Today's Date _____

Individual			Spouse (If Joint Bankruptcy Only)		
Last Name	First Name	Full Middle Name	Last Name	First Name	Full Middle Name
Address with Apt#, City, State, & Zip:			Address with Apt#, City, State, & Zip:		
Other Names Used (in last 8 years - married, maiden, or trade name)			Other Names Used (in last 8 years - married, maiden, or trade name)		
Social Security #	County		Social Security #	County	
Phone (H)	Phone (W)		Phone (H)	Phone (W)	
Cell Phone	E-mail Address (if you use it)		Cell Phone	E-mail Address (if you use it)	
What is the best time & way to contact you?			What is the best time & way to contact you?		
Your own past bankruptcies dates & court locations:			Your own past bankruptcies dates & court locations:		
Any pending bankruptcy cases against a Spouse or Partner? <input type="checkbox"/> Yes <input type="checkbox"/> No List Name of Spouse or Partner and date bankruptcy filed.			Any pending bankruptcy cases against a Spouse or Partner? <input type="checkbox"/> Yes <input type="checkbox"/> No List Name of Spouse or Partner and date bankruptcy filed.		

EMPLOYMENT INFORMATION - All jobs in the last 7 months including self-employment

Individual		Spouse (If Joint Bankruptcy Only)	
Employer #1	Job title	Employer #1	Job title
Job Address (where you actually work or work out of)		Job Address (where you actually work or work out of)	
Beginning & ending dates of employment:		Beginning & ending dates of employment:	
Employer #2	Job title?	Employer #2	Job title
Job Address (where you actually work or work out of)		Job Address (where you actually work or work out of)	
Beginning & ending dates of employment:		Beginning & ending dates of employment:	
Employer #3	Job title	Employer #3	Job title
Job Address (where you actually work or work out of)		Job Address (where you actually work or work out of)	
Beginning & ending dates of employment:		Beginning & ending dates of employment:	

Twin City Attorneys, P.A.
 2151 North Hamline Avenue
 Roseville, MN 55113
 (651) 639-0313 FAX: (651) 639-0056
 Email: TCATTORNEYS@GMAIL.COM

Are you expecting any changes in your employment income (previous page) or your non employment income (below) such as a pay raise or pay cut? A cut in hours? Greater or fewer overtime hours? If so, describe:

OTHER INCOME INFORMATION

CURRENT NON EMPLOYMENT INFORMATION – List any other money (or value) received currently from Social Security, welfare or MFIP, food stamps, pensions, retirement, small jobs, etc.		CURRENT NON EMPLOYMENT INFORMATION – List any other money (or value) received currently from Social Security, welfare or MFIP, food stamps, pensions, retirement, small jobs, etc.	
Sources & dates received:	Monthly amounts received:	Sources & dates received:	Monthly amounts received:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	State relationship & age of dependents or others living in your household (examples: Daughter - 1, Brother - 48):
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CURRENT AVERAGE MONTHLY PERSONAL EXPENSES

RENT/HOME MORTGAGE including taxes, ins. Check the box if mortgage payment includes <input type="checkbox"/> Taxes <input type="checkbox"/> Insurance	\$	INSURANCE: HOMEOWNERS/RENTERS If did not check box at left, give amount here:	\$
UTILITIES: ELECTRIC/HEAT	\$	LIFE INSURANCE	\$
WATER/SEWER	\$	HEALTH INSURANCE	\$
TELEPHONE	\$	AUTO INSURANCE	\$
OTHER _____	\$	OTHER INSURANCE	\$
HOME MAINTENANCE / REPAIRS	\$	TAXES (Income or property taxes owed)	\$
FOOD	\$	INSTALLMENT PAYMENTS FOR AUTO	\$
CLOTHING	\$	OTHER INSTALLMENT _____	\$
LAUNDRY & DRY CLEANING	\$	ALIMONY, CHILD SUPPORT payments	\$
MEDICAL & DENTAL (Includes cost of co-pays, prescriptions, supplements, other out-of-pocket)	\$	SUPPORT OF OTHER DEPENDENTS	\$
TRANSPORTATION (Includes gas, oil changes, car repairs. Does NOT include car payments)	\$	BUSINESS EXPENSES not already deducted from paystub	\$
RECREATION / ENTERTAINMENT / PERIODICALS / GYM CLUB FEES	\$	OTHERS - Specify items & amounts: _____ _____	\$
CHARITABLE CONTRIBUTIONS not already deducted from pay by employer	\$		

Are you expecting any changes in your expenses information? Example: car payments ending in a few months. Please describe:

REAL ESTATE PROPERTY -Answer ALL questions; provide copy of warranty deed for each parcel of real estate

PARCEL 1 Full Address: _____		Intention is to: <input type="checkbox"/> Keep the real estate <input type="checkbox"/> Let it go back to lender	Current Market Value \$ _____
Names on title: <input type="checkbox"/> In husband's name only <input type="checkbox"/> In wife's name only <input type="checkbox"/> Jointly husband & wife <input type="checkbox"/> Jointly owned with:	1st Mortgage Payoff / Company name \$ _____	2 nd Mortgage Payoff / Company name \$ _____	3 rd Mortgage Payoff / Company name \$ _____

PARCEL 2 Full Address: _____		Intention is to: <input type="checkbox"/> Keep the real estate <input type="checkbox"/> Let it go back to lender	Current Market Value \$ _____
Names on title: <input type="checkbox"/> In husband's name only <input type="checkbox"/> In wife's name only <input type="checkbox"/> Jointly husband & wife <input type="checkbox"/> Jointly owned with:	1st Mortgage Payoff / Company name \$ _____	2 nd Mortgage Payoff / Company name \$ _____	3 rd Mortgage Payoff / Company name \$ _____

PARCEL 3 Full Address: _____		Intention is to: <input type="checkbox"/> Keep the real estate <input type="checkbox"/> Let it go back to lender	Current Market Value \$ _____
Names on title: <input type="checkbox"/> In husband's name only <input type="checkbox"/> In wife's name only <input type="checkbox"/> Jointly husband & wife <input type="checkbox"/> Jointly owned with:	1st Mortgage Payoff / Company name \$ _____	2 nd Mortgage Payoff / Company name \$ _____	3 rd Mortgage Payoff / Company name \$ _____

LEASES & "EXECUTORY CONTRACTS"

Includes those not yet completed such as real estate options & ongoing employment contracts, etc.

Name & address of person or business you have a lease or contract with: _____	How long is the lease (12 month? 6 month?): _____	Assume Lease? <input type="checkbox"/> Keep the lease <input type="checkbox"/> Give up the lease
	The lease ends on (date): _____	
	The monthly payment is: \$ _____	

PERSONAL PROPERTY

Value means quick liquidation sale price – Do not give purchase price or replacement value.

ALL your property must be listed in the following categories (including that of your spouse).

Vehicles usually use Kelly Blue Book value -private party sale if Chapter 7 and NADA retail if Chapter 13.

Whose property is it? Circle one: Husband, Wife, or Joint.

1. Cash on hand	Value	Husband Wife Joint
2. Bank Account 1 <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD <input type="checkbox"/> Other Provide bank name, address & account number	Value	Husband Wife Joint
2. Bank Account 2 <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD <input type="checkbox"/> Other Provide bank name, address & account number	Value	Husband Wife Joint

2. Bank Account 3 <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CD <input type="checkbox"/> Other Provide bank name, address & account number	Value	Husband Wife Joint
3. Security deposits such as left with a landlord, utility company, or other	Value	Husband Wife Joint
4. Household Goods Includes furniture, furnishings, electronics, kitchen & bath wares, linens, appliances, computer for home use, wedding rings; DOES NOT INCLUDE CLOTHING OR OTHER JEWELRY.	Value	Husband Wife Joint
5. Books, Art, Collectibles Includes stamp and coin collections, art objects of all kinds, antiques, records, tapes, compact discs, all other collections and collectibles. Briefly describe:	Value	Husband Wife Joint
6. Clothing Includes all wearing apparel	Value	Husband Wife Joint
7. Furs & Jewelry Wedding rings are listed under Household Goods (above)	Value	Husband Wife Joint
8. Firearms and sports Includes photographic, and other hobby and sports equipment. Briefly describe and give each category a value:	Value	Husband Wife Joint
9. Insurance Policies Policies with a cash value or surrender value Provide the name of the company and cash value of any insurance policy you own, ie: whole life.	Value	Husband Wife Joint
10. Annuities Name the issuer and the current value of the annuity.	Value	Husband Wife Joint
11. Interest in an education IRA as defined in 26 USC §530(b)(1) or under a qualified state tuition plan as defined in 26 USC §529(b)(1)	Value	Husband Wife Joint
12. Pensions/IRAs/ERISA/Keough/Profit sharing plans 401(a), 401(k), Retirement Plans. Provide the name of the company that manages your pension or plan, the name of the plan, and the current value, even if not vested.	Value	Husband Wife Joint
13. Stocks Provide the name of the stock plan or company, and the current value of the stock. Do NOT include stock held under a retirement plan (as in #12 above).	Value	Husband Wife Joint
14. Interests in partnerships or joint ventures State the formal name of the partnership or joint venture and how much your interest is currently worth.	Value	Husband Wife Joint
15. Government and corporate bonds, and other negotiable and non-negotiable instruments Provide the name of the issuer of any bond or instrument you own and the current value.	Value	Husband Wife Joint
16. Accounts Receivable If anyone owes you money, provide the name of the person or company owing you money and the current amount owed to you.	Value	Husband Wife Joint
17. Alimony, Maintenance, (child) and other support, and property settlements in which the Debtor is or may be entitled. If you are owed child support, alimony, or spousal maintenance, provide which kind, the name & address of the person who owes it to you, and the amount due or past due.	Value	Husband Wife Joint
18. Other liquidated debts owed to Debtor INCLUDING TAX REFUNDS	Value	Husband Wife Joint

19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the Debtor other than those listed in the real property section		Value	Husband Wife Joint
20. Interest in Estate of a Decedent If anyone died and left you money or other property, state the name of the person who died and the value of the money & property bequeathed to you. Includes life insurance and other death benefits.		Value	Husband Wife Joint
21. Other contingent and unliquidated claims of every nature , including counterclaims of the Debtor and rights to setoff claims		Value	Husband Wife Joint
22. Patents, copyrights, and other intellectual property		Value	Husband Wife Joint
23. Licenses, franchises, and other general intangibles		Value	Husband Wife Joint
24. Customer lists or other compilations containing personally identifiable information as defined in 11 USC §101 (41A), provided to the Debtor by individuals in connection with obtaining a product or service from the Debtor primarily for personal, family, or household purposes.		Value	Husband Wife Joint
25. Vehicle 1 Make, model & year of vehicle (car, truck, motorcycle, RV, trailers)	Provide License Plate# &VIN or provide title for each vehicle.	Value	Husband Wife Joint
25. Vehicle 2 Make, model & year of vehicle (car, truck, motorcycle, RV, trailers)	Provide License Plate# &VIN or provide title for each vehicle.	Value	Husband Wife Joint
25. Vehicle 3 Make, model & year of vehicle (car, truck, motorcycle, RV, trailers)	Provide License Plate# &VIN or provide title for each vehicle..	Value	Husband Wife Joint
26. Boats, Motors & Accessories Provide the make, model & year of any boat(s) you own:		Value	Husband Wife Joint
27. Aircraft and accessories Provide the make, model & year of any aircraft or accessories you own:		Value	Husband Wife Joint
28. Office Equipment Furnishings & Supplies Briefly describe and give the value of property if sold today, If property is used it should be valued as used property – do not give new or replacement value.		Value	Husband Wife Joint
29. Business Machinery, Equipment & Supplies Briefly describe and give the value of property if sold today, If property is used it should be valued as used property – do not give new or replacement value.		Value	Husband Wife Joint
30. Inventory		Value	Husband Wife Joint
31. Animals Pets, cats, dogs, farm animals, livestock, etc. Provide number and type:		Value	Husband Wife Joint
32. Crops - growing or harvested		Value	Husband Wife Joint
33. Farming equipment and implements		Value	Husband Wife Joint
34. Farm supplies, chemicals, and feed		Value	Husband Wife Joint
35. Other Property Not Listed Describe any property not listed above and state the current value of the property.		Value	Husband Wife Joint

SECURED CREDITORS - debts with collateral such as your real estate, & cars

List All Creditors Holding Security Interests. Secured Debts are Debts with Collateral—Collateral is property which guarantees the payment of a debt and could be taken, repossessed or foreclosed upon by the creditor if required payments are not made.

Creditor name	Account No.	Check one: <input type="checkbox"/> Keep it <input type="checkbox"/> Surrender it
Address	Description of property owned (address of house or year, make, model of car):	
	How much could you sell the property for? \$	Balance due on loan? \$
IF YOU ARE BEHIND IN PAYMENTS ►	How many payments behind are you?	How far behind are you in dollars, including late charges? \$

Creditor name	Account No.	Check one: <input type="checkbox"/> Keep it <input type="checkbox"/> Surrender it
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	How much could you sell the property for? \$	Balance due on loan? \$
IF YOU ARE BEHIND IN PAYMENTS ►	How many payments behind are you?	How far behind are you in dollars, including late charges? \$

TAX DEBTS

List all taxes no matter how old they are, no matter what kind they are.

Tax Creditor name and address:			
Kind of tax (Income, Property...)	Tax year or date	Account No.	Balance due

Tax Creditor name and address:			
Kind of tax (Income, Property...)	Tax year or date	Account No.	Balance due

Tax Creditor name and address:			
Kind of tax (Income, Property...)	Tax year or date	Account No.	Balance due

Tax Creditor name and address:			
Kind of tax (Income, Property...)	Tax year or date	Account No.	Balance due

CHILD SUPPORT, MAINTENANCE, OR ALIMONY DEBTS

Name and address of person supported:		Name and address of agency you make payments to:	
Amount you pay or are obligated to pay monthly:	Amount you are in arrears:		
\$	\$		

DEBTS WITH CO-SIGNERS

Identify all debts that have co-signers or on which you are the co-signer.

Cosigner 1	Cosigner 2
Address	Address
Creditor	Creditor
Are You – <input type="checkbox"/> Principal Borrower <input type="checkbox"/> Guarantor Only <input type="checkbox"/> One of 2 Joint Borrowers	Are You – <input type="checkbox"/> Principal Borrower <input type="checkbox"/> Guarantor Only <input type="checkbox"/> One of 2 Joint Borrowers

UNSECURED CREDITORS (including student loans)

Instead of writing all your debts out, you could provide us complete copies of your bills. Indicate whose debts they are (husband's, wife's, or joint)
List all debts, even those you intend to pay. Stop paying on debts that you are going to bankrupt out, assuming you will file soon.

Creditor name & address:		Creditor name and address	
If married, whose debt? <input type="checkbox"/> Husband's <input type="checkbox"/> Wife's <input type="checkbox"/> Joint		If married, whose debt? <input type="checkbox"/> Husband's <input type="checkbox"/> Wife's <input type="checkbox"/> Joint	
Account No.	Balance due:	Account No.	Balance due:
	\$		\$
Circle: Credit Card Medical Utility Bank loan Bad Checks Student Loan Personal loan from friend Mortgage deficiency Other, please specify: _____		Circle: Credit Card Medical Utility Bank loan Bad Checks Student Loan Personal loan from friend Mortgage deficiency Other, please specify: _____	

Creditor name and address		Creditor name and address	
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UNSECURED CREDITORS (including student loans)

Instead of writing all your debts out, you could provide us complete copies of your bills. Indicate whose debts they are (husband's, wife's, or joint)
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SPECIAL ISSUES

<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you used your credit cards in the past 6 months?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you taken bank loans or cash advances from a single creditor that total \$825 or more in the last 3 months? How much, when, who from?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you made purchases on credit in the last 3 months from a single creditor that total \$550 or more? How much and when?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you or your spouse repay (1) a relative, (2) a business partner, (3) a partnership in which you are a general partner, or (4) a corporation for which you are a director, officer, or person in control in the last year? Who, when, and how much?

CHECKLIST FOR SPECIAL LIABILITIES

<input type="checkbox"/> Yes <input type="checkbox"/> No	1. Domestic Support obligations (Priority debts) A "Domestic Support Obligation" is a debt for Alimony, Maintenance or Support (including assistance provided by a unit of government) that accrues before or after you file Bankruptcy that is owed or recoverable by a Spouse, Former Spouse, Child (or by a Parent, Legal Guardian (or Responsible Relative for a Child of Yours), or by a unit of Government. This term refers to debts established in a Separation Agreement, Divorce Decree, Property Settlement Agreement, an Order of a Court of record, or in a determination made by a unit of government.
<input type="checkbox"/> Yes <input type="checkbox"/> No	2. Taxes and certain other debts owed to governmental units Taxes, customs, duties, and penalties owing to federal, state, and local governmental units.
<input type="checkbox"/> Yes <input type="checkbox"/> No	3. Claims for death or personal injury while Debtor was intoxicated. Refers to any claim arising from Your operation of a motor vehicle, vessel or aircraft if the operation was unlawful because you were intoxicated from use of alcohol, a drug or another substance.
<input type="checkbox"/> Yes <input type="checkbox"/> No	4. Student loan obligations
<input type="checkbox"/> Yes <input type="checkbox"/> No	5. Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported above (Not Entitled to Priority). Include any claims owed from a provision for property division in a Divorce Decree, Separation Agreement or Property Settlement Agreement.
<input type="checkbox"/> Yes <input type="checkbox"/> No	6. Obligations to Pension or Profit Sharing , and other similar obligations in which you owe to the Pension or Profit Sharing plan for loans taken against your Pension or Profit Sharing plan.
<input type="checkbox"/> Yes <input type="checkbox"/> No	7. Disabled Veteran's Declaration You make a Disabled Veteran's Declaration if you are a disabled veteran and your indebtedness occurred primarily during a period in which you were on active duty or performing homeland defense duty. Disabled Vet 38 U.S.C. 3741(1) Homeland defense duty 32 U.S.C. 901(1).

CHECKLIST FOR STATEMENT OF FINANCIAL AFFAIRS

Do any of these apply to you? If so, explain at the bottom of this chart.

<input type="checkbox"/> Yes <input type="checkbox"/> No	1. Income from employment or operation of a business during the two years before this year?
<input type="checkbox"/> Yes <input type="checkbox"/> No	2. Income other than from employment or operation of business during the previous two years?
<input type="checkbox"/> Yes <input type="checkbox"/> No	3a. If most of your debts are consumer debts, list payments to any one creditor which came to \$600 or more during the past 90 days.
<input type="checkbox"/> Yes <input type="checkbox"/> No	3b. If most of your debts are business debts, list payments to any one creditor which came to \$5,475 or more during the past 90 days.
<input type="checkbox"/> Yes <input type="checkbox"/> No	3c. Payments made to insiders within the past year. Did you make payments or transfers to closely related persons within the past 12 months? Have you made any payments to a creditor who was a relative or partner or a corporation of which you are a director, officer or person in control?
<input type="checkbox"/> Yes <input type="checkbox"/> No	4. Lawsuits, administrative proceedings, executions, garnishments, levies, and attachments within one year of filing. Did anyone sue you or did you sue anyone,? Did you file for divorce? Did you voice a complaint against the government or did the government issue a complaint against you involving licenses or any other issue? Provide documents.
<input type="checkbox"/> Yes <input type="checkbox"/> No	5. Repossessions, foreclosures, returns within one year. Has anyone repossessed or foreclosed upon any property of yours? Include property you agreed to transfer to avoid foreclosure.
<input type="checkbox"/> Yes <input type="checkbox"/> No	6a. Assignments. Within the last 120 days, has any property of yours been assigned for the benefit of a creditor? Include assignments by your spouse unless you are separated and you are not filing a joint bankruptcy.
<input type="checkbox"/> Yes <input type="checkbox"/> No	6b. Receiverships. Has any of your property been in the hands of a custodian, receiver, or court-appointed official within one year of filing?
<input type="checkbox"/> Yes <input type="checkbox"/> No	7. Gifts. Within one year, have you made any gifts worth a total of more than \$100 to any one person? Do NOT include gifts worth less than \$200 to family members.
<input type="checkbox"/> Yes <input type="checkbox"/> No	8. Losses from Fire, Theft or Gambling. Within the last year, has a fire destroyed any of your property, has any property of yours been stolen or have you lost any money or other property while gambling?
<input type="checkbox"/> Yes <input type="checkbox"/> No	9. Payments related to debt counseling or bankruptcy. Payments made within one year of property transferred by or on behalf of the Debtor to anyone, including attorneys, for consultation concerning debt consolidation , relief under bankruptcy law or preparation of bankruptcy petition.

<input type="checkbox"/> Yes <input type="checkbox"/> No	10a. Other transfers. Have you transferred any other property either absolutely or as security (other than in the ordinary course of business) within two years of filing? Married Debtors under Chapter 13 must include transfers by either or both spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.
<input type="checkbox"/> Yes <input type="checkbox"/> No	10b. Transfers to Self Settled Trust. Within the last 10 years , have you transferred any money or property to a trust or similar device of which the Debtor is a beneficiary?
<input type="checkbox"/> Yes <input type="checkbox"/> No	11. Closed Financial Accounts. In the past year , have you closed or has a bank, credit union, or financial business closed an account which was in your name?
<input type="checkbox"/> Yes <input type="checkbox"/> No	12. Safe Deposit Boxes. Have you had a safe deposit box within the last 12 months? What is the dollar value of the contents? \$ _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	13. Setoffs. Within the last 90 days , has any bank or creditor made a setoff against a debt or deposit of yours?
<input type="checkbox"/> Yes <input type="checkbox"/> No	14. Property Held for Another. At this time, do you have property in your possession which belongs to someone else?
<input type="checkbox"/> Yes <input type="checkbox"/> No	15. Prior Address(es). Have you had a different address within the last 3 years? List addresses, dates when lived there, and names you went by if different from now.
<input type="checkbox"/> Yes <input type="checkbox"/> No	16. Spouses & Former Spouses. During the last 8 years , have you lived in any of the following states while married: Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington or Wisconsin?
17. Environmental Information. The following definitions apply: “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 or operated by the Debtor, including, but not limited to, disposal sites. “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.	
<input type="checkbox"/> Yes <input type="checkbox"/> No	17a. Have you received notice in writing by a governmental unit that you may be liable or potentially liable under or in violation of an Environmental Law? If so, provide notice.
<input type="checkbox"/> Yes <input type="checkbox"/> No	17b. Have you provided notice to a governmental unit of a release of Hazardous Material? If so, provide notice.
<input type="checkbox"/> Yes <input type="checkbox"/> No	17c. Proceedings under environmental law. Are there any judicial or administrative proceedings, including settlements or orders, under any environmental law in which you are a party? If so, provide papers.

