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BANKRUPTCY QUESTIONNAIRE: Chapter 7 ___ Chapter 13 ___

NOTICE: Official Bankruptcy forms will be completed using the information you provide in this questionnaire. You will be required to sign a declaration stating under penalty of perjury that the information is true and correct. **Failure to disclose assets in a bankruptcy case is a federal crime punishable by fines up to \$5000 and imprisonment for up to five years.** In addition, failure to provide complete and accurate information on bankruptcy forms may result in the dismissal of your case or denial of your bankruptcy discharge (debts will not be discharged). ANY DEBT OWED TO A CREDITOR NOT LISTED ON YOUR FORMS, OR WHOSE ADDRESS IS INCORRECT WILL PROBABLY NOT BE DISCHARGED. YOU WOULD REMAIN LIABLE TO THAT CREDITOR AFTER THE BANKRUPTCY CASE IS DISCHARGED.

TODAY'S DATE: _____

How did you hear about Mr. Spivey?

TV ___ Radio ___ Billboard ___ Internet ___ Referral ___ Streaming Service ___ Other ___

Where did you get Mr. Spivey's phone number?

TV ___ Radio ___ Billboard ___ Internet ___ Referral ___ Streaming Service ___ Other ___

1. Full Name _____ SS# _____

2. Full Name of spouse _____ SS# _____

3. Physical Address _____

4. Mailing Address _____

5. In which parish do you live? _____

List any prior addresses within the last three years

6. Phone Numbers: Home _____ Work _____ Cell _____

Spouse Work _____ Spouse Cell _____

Email Address: _____

7. Are you married? Yes _____ No _____

If you answered YES, are you legally separated or living in separate households?
(Please specify details)

If you are married, please list your spouse's income/expenses under the
income/expense sections below, even if they are not filing the bankruptcy with you.

**LISTING YOUR SPOUSE'S INFORMATION DOES NOT OBLIGATE THEM
TO FILE BANKRUPTCY**

8. Do you have an ongoing personal injury case/claim or are you a party of any
other type of lawsuit? Yes _____ No _____

**IF YOU DO NOT LIST YOUR PERSONAL INJURY CASE IN YOUR
BANKRUPTCY, YOU LOSE THE RIGHT TO SUE IN STATE COURT**

8(a) If your answer to question 8 was yes, please list the type of lawsuit, the date of
the injury/claim, the attorney who is representing you in your case, and details of
the case.

9. Have you have filed bankruptcy in the last 8 years _____
If yes, please list the following:

Case # _____ Date filed: _____ Ch 7 _____ (or) Ch 13 _____

10. Employer Name and Address: _____

Job Title _____ How long have you been employed there? _____

How often are you paid?

Weekly _____ Every 2 weeks _____ Twice a Month _____ Monthly _____

Gross Pay (before anything is held out) \$ _____ Taxes \$ _____ Insurance \$ _____

Union dues \$ _____ Other Deductions \$ _____ Type _____ Take Home \$ _____

10(a) Name and address of spouse's employer: _____

Job Title _____ How long has spouse been employed there? _____

How often are you paid?

Weekly _____ Every 2 weeks _____ Twice a Month _____ Monthly _____

Gross Pay (before anything is held out) \$ _____ Taxes \$ _____ Insurance \$ _____

Union dues \$ _____ Other Deductions \$ _____ Type _____ Take Home \$ _____

10(b) Do you have a second/part-time job (cutting hair, mowing yards, etc.)? If so, list the job and average monthly amount earned:

11. List any other income you or your spouse receive (child support, food stamps, social security, disability) and the amount: _____

12(a) Do you have an interest in a business? If so, list the name and percentage of ownership interest: _____

12(b) If so, have you borrowed any money in the business name (PPP Loan, SBA Loan, etc.)? If so, list the type of loan, the date, and amount received: _____

13. List any and all bank accounts of any kind:

Bank: _____ Type: _____ Balance: \$ _____

Bank: _____ Type: _____ Balance: \$ _____

Do you have any cash on hand, in a lock box, at your home, etc? If yes, how much?

Do you have a safe deposit box? If yes:

Safe Deposit Box Monthly payment \$ _____ Bank _____

Contents _____

14. Do you or your spouse have any type of retirement account or 401K either through your employer or separately? _____

If yes, please list the approximate amount in the account. _____

LIST ALL ASSETS:

List all real estate that you possess or own. Please list below any property or land you are buying or that is mortgaged. List street address and approximate value:

1. _____

2. _____

3. _____

Do you have an interest in any heir property? If so, please list the property and value:

Did you purchase the home within the last four years? _____

List all vehicles. List year, make, model (Example: Extended Cab, 4 Door, SE, LE, etc.) and approximate mileage and estimated value:

1. _____

2. _____

3. _____

4. _____

Medical Expenses (including prescription drugs): \$ _____ monthly

Transportation (gas) \$ _____ monthly

Charitable Contributions: \$ _____ monthly

Insurance: (Do not list if this item is deducted from your paycheck or included in your mortgage)

Homeowner's or Renter's insurance: \$ _____ monthly

Life Insurance : \$ _____ monthly

Hospitalization: \$ _____ monthly

Automobile Insurance \$ _____ monthly

If Chapter 7, list automobile payment: \$ _____ monthly

If Chapter 7, list any other payments that you plan to keep: \$ _____ monthly

\$ _____ monthly

Day Care Expenses: \$ _____ monthly

Any other monthly expenses not listed above (list item and amount):

_____ \$ _____ monthly

_____ \$ _____ monthly

13. Are you holding any property that belongs to someone else? _____

What is it? _____

14. Is anyone holding property for you? _____ What is it? _____

Name & address of person holding your property _____

15. Have you transferred any property within the last two years? _____ If so, give the name and address of the person receiving the property, a brief description of the property, and amount of money involved: _____

16. Have you had any property repossessed in the past year? _____ If so, state who repossessed the property, description of the property, date repossessed, and value of the property: _____

17. Gross Income received by you and your spouse to date for 2019 \$ _____

Gross Income for 2020 \$ _____ Gross Income for 2021 \$ _____

18. List the gender, relationship to you, and ages of all children living in your household: _____

19. If you have any lawsuits or judgments against you, please list the following for each:

Name of person filing suit: _____

Suit # _____ Where filed _____ Title of Suit _____

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Suit # _____ Where filed _____ Title of Suit _____

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Suit # _____ Where filed _____ Title of Suit _____

20. Are you current on your utility bills, specifically, your Entergy bill? _____

Have you filed all required federal and state tax returns?

Yes _____ **No** _____

If not, list what years are not filed and estimate the amount you owe:

IRS \$ _____ for tax years _____

State of Louisiana \$ _____ for tax years _____

If you owe either the IRS or LDR, were the tax returns filed on time for the tax years you owe? _____

Did you receive a tax refund in 2020? If so, how much and how was the refund spent?

Did you receive a tax refund in 2021? If so, how much and how was the refund spent?

Do you pay child support to anyone? If yes, please list the recipient's name, address, telephone number, and the amount of support you pay each month:

LIST ALL CREDITORS

Name of Creditor:

Address: _____

Balance Owed: \$ _____ Interest Rate: _____ % Actual Value: \$ _____

Description and value of collateral:

Co-signer's name and address (if applicable):

Date of original loan (Purchase date for an auto loan): _____

Name of Creditor:

Address: _____

Balance Owed: \$ _____ Interest Rate: _____ % Actual Value: \$ _____

Description and value of collateral:

Co-signer's name and address (if applicable):

Date of original loan (Purchase date for an auto loan): _____

Name of Creditor:

Address:

Balance Owed: \$ _____ Interest Rate: _____ % Actual Value: \$ _____

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Description and value of collateral:

Co-signer's name and address (if applicable):

Date of original loan (Purchase date for an auto loan): _____

Name of Creditor:

Address: _____

Balance Owed: \$ _____ Interest Rate: _____ % Actual Value: \$ _____

Description and value of collateral:

Co-signer's name and address (if applicable):

Date of original loan (Purchase date for an auto loan): _____

I, _____, have reviewed the information I provided in this questionnaire and all of the facts I have listed are true and correct to the best of my knowledge.

Client

Date

Client

Date