

**TOLL FREE - 1 (888) 713-7137** 

## **PRE-BANKRUPTCY CONSULTATION FORM**

## **Personal Information**

Name:					
	last		first		middle initial
Address:					
	street		city		zip
Social Security	No.		<del>-</del>		
Phone:					
Email:					
Marital status:	□ single □ separated		□ divorced (in	f so when	)
Number of chil	dren/dependents	s:	_ages:		
Name of Spous	se (or joint filer)	:			
Address (if diff	ferent that above				
Spouse's Socia	al Security No.	street	<del></del>	city	zip
How do you pr	efer to be contac	eted by my offic	ce? □ pho	one	□ email
How did you he	ear about Hense	Law Office?	□ referral □	advertise	ment   internet
*if adv	erral, please indi- ertisement, please ernet, please spec	se specify which	h publication		
	<u>Pr</u>	ior Bankruptc	y information		
Have you or yo	our spouse ever f	iled for bankru	ptcy before?	□ No	□ Yes
If you answered	d yes, please spe	cify for each pr	rior case:		

Discharge recei	ived? □ Yes □ No (if no	:State filed:ot, please specify why) if any):			
Chapter filed: Discharge recei	□ 7 □ 13 Case Number ived? □ Yes □ No (if no	:State filed:) it, please specify why) if any):			
Have you or your spous	se filed more than 2 banks	ruptcy cases? □ No □ Yes			
	<b>Income Infor</b>	mation_			
	Present Employment	t Information			
Your employer:		Job title:			
Address:					
Pay structure:	Street  □ salary □ hourly (\$	$\begin{array}{ccc} & City & Zip \\ \hline \_/hour) & \Box \text{ commission} & \Box \text{ other} \end{array}$			
Pay frequency:	□ weekly □ bi-weekly (every other week) □ monthly □ bi-monthly (twice per month.) □ other				
How long have you won	rked there?				
Spouse's Employer:		Job title:			
Spouse's Employer: Address:					
	Street	Job title:			
Address:	Street  □ salary □ hourly (\$_	$\begin{array}{c cccc} City & Zip \\ \hline \_/hour) & \square \text{ commission} & \square \text{ other} \\ \hline \text{(every other week)} & \square \text{ monthly} \\ \end{array}$			
Address: Pay structure:	Street  □ salary □ hourly (\$_□  □ weekly □ bi-weekly (□ bi-monthly (twice per	$\begin{array}{c cccc} City & Zip \\ \hline \_/hour) & \square \text{ commission} & \square \text{ other} \\ \hline \text{(every other week)} & \square \text{ monthly} \\ \end{array}$			
Address:  Pay structure:  Pay frequency:	Street  □ salary □ hourly (\$_□  □ weekly □ bi-weekly (□ bi-monthly (twice per	City Zip /hour) □ commission □ other  (every other week) □ monthly month.) □ other			
Address:  Pay structure:  Pay frequency:  How long have they wo	Street  □ salary □ hourly (\$_ □ weekly □ bi-weekly (□ bi-monthly (twice per orked there?  Alternative means  spouse have any other jo	City Zip /hour) □ commission □ other  (every other week) □ monthly month.) □ other  of income  bs in addition to what's listed above?			
Address:  Pay structure:  Pay frequency:  How long have they wo	Street  salary hourly (\$_ weekly bi-weekly (bi-monthly (twice per orked there?  Alternative means  spouse have any other journey.	City Zip /hour) □ commission □ other  [every other week) □ monthly month.) □ other  of income  bs in addition to what's listed above?  per (week/month/year)			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  Do you or your	Street  □ salary □ hourly (\$_ □ weekly □ bi-weekly (□ bi-monthly (twice per orked there?  Alternative means  spouse have any other journ of the properties	City Zip /hour) □ commission □ other  [every other week) □ monthly month.) □ other  of income bs in addition to what's listed above?  per (week/month/year)  social security benefits?			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  Do you or your	Street  salary hourly (\$_ weekly hourly (\$_ weekly hi-weekly (\$_ bi-monthly (twice per orked there?  Alternative means  spouse have any other jo Yes - \$_ spouse currently receive Yes - \$_	City Zip			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  Do you or your  No  Do you or your	Street  □ salary □ hourly (\$_ □ weekly □ bi-weekly (□ bi-monthly (twice per orked there?  Alternative means  spouse have any other journ of the per of the spouse currently receive □ Yes - \$  spouse currently receive □ Spouse currently receive □ Yes - \$	City Zip			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  Do you or your  No  Do you or your	Street  salary hourly (\$_ weekly hourly (\$_ weekly hourly (\$_ bi-monthly (twice per orked there?  Alternative means  spouse have any other jo Yes - \$_ spouse currently receive Yes - \$_ spouse currently receive Yes - \$_	City Zip			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  Do you or your  No  Do you or your	Street  □ salary □ hourly (\$_ □ weekly □ bi-weekly (□ bi-monthly (twice per orked there?  Alternative means  spouse have any other joung and the spouse currently receive □ Yes - \$_  spouse currently receive	City Zip			
Address:  Pay structure:  Pay frequency:  How long have they wo  Do you or your  No  No	Street  salary hourly (\$_ weekly hourly (\$_ weekly hourly (\$_ bi-monthly (twice per orked there?  Alternative means  spouse have any other jo Yes - \$_ spouse currently receive	City Zip			

	□ No □ Yes - \$ per (week/month/year)
•	Do you or your spouse currently receive any income from <i>rental property</i> ?
	□ No □ Yes - \$ per (week/month/year)
•	Do you or your spouse currently receive alimony or child support?
	□ No □ Yes - \$ per (week/month/year)
•	Do you or your spouse currently have any other sources of income?
	□ No □ Yes - \$ per (week/month/year)
	<b>Monthly Expense Information</b>
	<u>Housing</u>
	□ Own/Buying □ Renting
Renters:	What is your monthly rent amount? \$
	Who is your landlord?  Are you current with your rent?
	Are you current with your rent?
	Do you have a written lease?
Owners/Buyers.	
	Balance owed on 1° mortgage:
	What is your regular monthly payment? Does this include Property Taxes and Insurance? □ Yes □ No
	Does this include Property Taxes and Insurance? ☐ Yes ☐ No
	If you are past due with this mortgage, how many months?
	What year did you obtain this mortgage?
	Is this an adjustable rate mortgage? □ Yes □ No
	2 <sup>nd</sup> mortgage company:
	Balance owed on 2 <sup>nd</sup> mortgage:
	What is your regular monthly payment?
	If you are past due with this mortgage, how many months?
	What year did you obtain this mortgage?
	Is this an adjustable rate mortgage? □ Yes □ No
	Are you aware of any other liens against this property? □ No □ Yes
	What are your annual property taxes for this property? \$
	Does your name(s) appear on the Deed to any other real estate? $\Box$ No $\Box$ Ye
	<u>Automobiles/Vehicles</u>
Vehicle 1:	Year Make: Model: □ Purchase □ Lease (expires:) □ Free and clear (no liens)
	□ Purchase □ Lease (expires:) □ Free and clear (no liens)
	Lienholder/financier:  Balance owed: \$ Date of contract:
	Mileage: Condition:
	witheape: Condition:

Vehicle 2:	Do you wish to Are you curred Do you have in Year Purchase	nent: to keep this vehice ant with the payme insurance on this Make: Lease (expirancier:	ele? nent? vehicle? res:	□ Yes	Model: □ Free	□ No □ No □ No □ no and clear (no liens
	Monthly payn Do you wish t Are you curre	hent:to keep this vehicent with the paymentsurance on this	Condi _ cle? nent?	□ Yes		□ No □ No □ No
Misc. Vehicles:	•	any other vehicles				
		□ Yes		□ No		
		Other exp	enses:			
Gas/Electric:	\$		Food:			\$
Water/Sewer	\$		Clothin	g:		\$
Phone:	\$		Daycare	e:		\$
Cable/Internet	\$		Medica	1/Dental	:	\$
Homeowners Ins.:	\$		Health 1	Ins.:		\$
Home maintenance:	\$		Life Ins	s.		\$
Automobile Ins.:	\$		Charity	:		\$
Alimony:	\$		Child s	upport:		\$
Student loans:	\$		Laundr	y/dry cle	ean:	\$
Hair care/grooming:	\$		Pet food	d/care:		\$
Transportation: (gas/auto maintenance)	\$		Cigaret	tes:		\$
Other monthly expense (please specify)	:\$			nonthly specify		: \$

## **Additional Asset Information**

Do you or your spouse have any checking accounts?	□ Yes	□ No
If yes, at what financial institution(s)?		
Do you or your spouse have any savings accounts?	□ Yes	□ No
If yes, at what financial institution(s)?		
Are you or your spouse named as a joint owner on anybody else's chec Yes   No	king/savings	account?
Do you/your spouse keep any cash on hand?	□ Yes	□ No
Do you/your spouse own the furniture in your home?	□ Yes	□ No
What do you believe the furniture at your home is worth*?	\$	
Do you/your spouse own any consumer electronic equipment?	□ Yes	□ No
What do you believe that your electronic equipment is worth*?	\$	
Do you/your spouse own any jewelry?	□ Yes	□ No
What do you believe that your jewelry is worth*?	\$	
Do you/your spouse own any firearms?	□ Yes	□ No
What do you believe your firearms are worth*?	\$	
Do you/your spouse own any collectibles (i.e. stamps, coins, etc.)?	□ Yes	□ No
What do you believe your collectibles are worth*?	\$	
Do you/your spouse own any books, pictures or art work?	□ Yes	□ No
What do you believe that your books, pictures or art work is worth*?	\$	
What do you believe that your personal clothing is worth*?	\$	
Do you/your spouse have any retirement accounts (401k, IRA, etc.)?	□ Yes	□ No
What is the present value of this/these account(s)?	\$	
Do you or your spouse any ownership interest in any property not liste.	d? □ Yes	□ No

\*All values should be approximate values you could get if you sold the property at a garage sale

Note: It is important that you list all property that you own, so that it may be properly disclosed to the

Court, and (in most cases) exempted from your creditors. The law is very generous as far as what you are allowed to keep. Consequences for failing to disclose assets/property can be disastrous, and perhaps even criminal.

## **Debt Information**

3.	\$		
2.	<u>\$</u>		
1	<u>\$</u>		
Name/address of creditor	Amou	nt Owed D	Date account opened
NOTE: If you have a copy of a recent credit	-	essary for you to co	omplete this section.
NOTE: All Debts MUST be listed, including Debts that you are a co-signer on, and Debts	•	keep paying, Debt	es to family and friends,
Please indicate who you presently owe:			
	<u>Creditors</u>		
Do you have any debts owed to family memb	bers?	□ Yes	□ No
Have you used money from anyone else to pa	ay tax debts?	□ Yes	□ No
Have you incurred any debt in the past 90 days?			□ No
Are your debts primarily consumer debts?		□ Yes	□ No
Do you owe on any student loans?		□ Yes	□ No
Do you owe any tax debts?		□ Yes	□ No
Have you co-signed for any debts that are no	t your own?	□ Yes	□ No
Have you been garnished in the past year?	□ Yes	□ No	
Are you aware of any Judgments entered aga	□ Yes	□ No	
Are you presently being sued?		□ Yes	□ No

4.	<u>\$</u>	
5.	<u>\$</u>	
6.		
7.	<u>\$</u>	
8.	<u>\$</u>	
9.		
10.	<u>\$</u>	
11.	<u>\$</u>	
12.		
13.	\$	
14.	<u>\$</u>	
15.	<u>\$</u>	
16.	<u>\$</u>	

17.	 <u>\$</u>	
18.	<u>\$</u>	
19.	<u>\$</u>	
20.	<u>\$</u>	