#### BANKRUPTCY SUPPORT SERVICES, INC.

101 EAST DARBY ROAD (610) 789-9999

825 E. ALLEGHANY AVENUE HAVERTOWN, PA 19083 PHILADELPHIA, PA 19134 (215) 739-7039

707 LAKESIDE DRIVE **SOUTHAMPTON, PA 18966** (215) 731-0400

PLEASE NOTE: THIS FORM MUST BE COMPLETED AND RETURNED AT LEAST THREE (3)

BUSINESS DAYS PRIOR TO THE SIGNING OF YOUR PEITION

\*\*THE BANKRUPTCY COURT REQUIRES INFORMATION REGARDING YOUR SPOUSE WHETHER THE SPOUSE IS FILING OR NOT\*\*

IS THIS A JOINT BANKRUPTCY FILING? YES \_\_\_\_\_ NO\_\_\_\_

#### **CLIENT INFORMATION WORKSHEET**

	DEBTOR		JOINT DEBTOR**
FULL NAME:			
STREET ADDRESS:			
MAILING ADDRESS:		-	
COUNTY:		-	
HOME PHONE:		_	
CELL PHONE:		_	
WORK PHONE:		_	
SOCIAL SECURITY:		_	
LENGTH OF TIME AT	T ABOVE ADDRESS:	_	
PREVIOUS ADDRESS	G (IF MOVED WITHIN LAST 2 Y	EARS)	
WHAT OTHER PERSO	ONAL AND/OR BUSINESS NAM	IES HAVE YOU	U USED IN THE LAST SIX (6) YEARS?
MARTIAL STATUS:			
AGE:			
OCCUPATION:		<del></del>	
LENGTH OF EMP.:			
EMPLOYER NAME:			
EMPLOYER ADD.:			

#### **DEPENDENTS**

NAME:	<del></del>
AGE:	
RELATIONSHIP:	
NAME:	
AGE:	
RELATIONSHIP:	
PRIOR BANKRUPTCIES: If any immediate	te family member or business partner has a Bankruptcy pending, please
list the case number, name of debtor, relatio	on to you, date & location where filed and the bankruptcy judge:
PENDING BANKRUPTCIES: If any imme	ediate family member or business partner has a Bankruptcy pending,
please list the case number, name of debtor,	relation to you, date & location where filed and the bankruptcy judge:
THE FOLLOWIN	NG QUESTION MUST BE ANSWERED
WERE YOU SUED/ HAVE YOU SUED.	ANYONE IN THE LAST YEAR (12 MONTHS) FOR ANY REASON
(Including domestic, personal inju	ury, workmen's comp, social security disability, criminal, civil)  NO
	ESTION, YOU MUST PROVIDE US WITH THE NATURE OF THE OURT CASE WHERE IT WAS FILED, CAPTION & CASE
	RED ANY PROPERTY IN THE LAST FOUR YEARS? NO
TYPE OF PROPERTY	DATE OF TRANSFER:
TYPE OF PROPERTY	DATE OF TRANSFER:

#### **YOUR PROPERTY**

Real Property is land and things permanently attached to land. Included is unimproved land, vacation cabins, condominiums, duplexes, rental property, business property, mobile home park spaces, agricultural land, airplane hangers, and any other building permanently attached to land. It also includes property you are entitled to by a trust and all property in which you have legal, equitable, or future interest. If you are in a community property state, you also own your spouse's real estate. All leases and time-shares should be listed on the worksheet for Schedule G.

# **REAL ESTATE (SCHEDULE A)**

WHAT IS IT?:	WHO OWNS IT?
ADDRESS:	
MARKET VALUE:	
WHAT IS IT?:	WHO OWNS IT?
MARKET VALUE:	
WHAT IS IT?:	
MARKET VALUE:	VALUE OF LIENS:
Have you sold or purchased real estate	within the last twelve (12) months?
What was purchased/sold?	
Address of property purchased/sold: _	
Amount of purchase/sale:	

# PERSONAL PROPERTY (SCHEDULE B)

5.) Stocks (Bonds) and in What is it?	nterests, Incorporated and Unin Who owns it? Value of Liens:	Market Value:
5.) Stocks (Bonds) and in What is it?	nterests, Incorporated and Unin Who owns it?	corporated Companies: Market Value:
5.) Stocks (Bonds) and in	nterests, Incorporated and Unin	corporated Companies:
Name & Address of Com-	pany noming Pension/Profit Si	naring:
What is it?		Market Value:
4.) Pension or Profit Shar	_	M. L. W.I
		Market Value:
3.) Annuities:		
Description of contents: _		
Who has access? (name &	ż address)	
past year:		
2.) List each safe deposit	or other box/depository in whi	ch you have had valuables within the
Name & Address of Ba	ank:	
Balance in Account:	Ac	ccount Number:
B. Checking/Savings:		ho owns it?
Dululice III / Iccoult.	Ac	ccount Number:
		ho owns it?
A. Checking/Savings:	<b>X</b> X7	7 140

6.) Security Deposits:			
What is it?	Who owns it?		Market Value:
Your Ownership Share (%, \$):		Value of Liens:	
Amount of Equity:			
7a.) Automobiles, Trucks, Trai	lers and other vehicl	les:	
Year, Make & Model:			
Who owns it?	Market Value:	<del> </del>	
Value of Liens:	Fair Market Value:		
7b.) Automobiles, Trucks, Trai	lers and other vehicl	les:	
Year, Make & Model:			
Who owns it?	Market Value:	<del></del>	
Value of Liens:	Fair Market Value:		
What is it?Your Ownership Share (%, \$): Amount of Equity:			
9.) Government and Corporate	Ads & other Negoti	iable and Non-No	egotiable Instruments:
What is it?	Who owns it? _		Market Value:
Your Ownership Share (%, \$):		Value of Liens:	
Amount of Equity:			
10.) Accounts Recievable:			
What is it?	Who owns it? _		Market Value:
Your Ownership Share (%, \$):		Value of Liens:	
Amount of Equity:			
11.) Family Support (to which	ch you are entitled):		
What is it?	Who owns it?		Market Value:

What is it?	Who owns it? _		Market Value:
Your Ownership Share (9	%, \$):	Value of Liens:	
Amount of Equity:			
13.) Equitable and futi	ure interests, Life Estates	and Rights or Pov	wers:
What is it?	Who owns it? _		Market Value:
Your Ownership Share (9	%, \$):	Value of Liens:	,
Amount of Equity:			
14.) Interest in an Esta	ate of a Decedent:		
What is it?	Who owns it? _		Market Value:
Your Ownership Share (9	%, \$):	Value of Liens:	
Amount of Equity:			
15.) Other Contingent	and Unliquidated Claims	:	
	•		Market Value:
Amount of Equity:			
16.) Patents, Copyrigh			3.6.137.1
			Market Value:
		Value of Liens:	
Amount of Equity:			
17.) Licenses, Franchi	ses and other General Inta	angibles:	
What is it?	Who owns it? _		Market Value:
Your Ownership Share (9	%, \$):	Value of Liens:	
Amount of Equity:			

# YOUR DEBTS – SECURED AND PRIORITY

**PLEASE NOTE**: Kindly list the name, address, phone number and Account Number of each creditor along with your current balance and/or payoff figure.

Secured debts are car loans, home equity loans, second mortgages, or any loans where property is pledged as security. All other types of debts are unsecured.

1.) Name of Primary Mortgage Co	mpany:
Address:	
Phone Number:	Account Number:
Date Debt Incurred:	Monthly Mortgage Payment:
Who is liable for debt?:	Market Value of Property:
Balance Owned:	Is Anyone Else Liable?: If so, who?
Are Payments Current?:	If not, how far behind?:
Has Mortgage Company begun a F	oreclosure Action?:
Is a Sheriff Sale scheduled?:	If yes, when?:
2.) Name of Secondary Mortgage (Address:	Company:
Phone Number:	Account Number:
Date Debt Incurred:	Monthly Mortgage Payment:
Who is liable for debt?:	Market Value of Property:
Balance Owned:	Is Anyone Else Liable?: If so, who?
Are Payments Current?:	If not, how far behind?:
Has Mortgage Company begun a F	oreclosure Action?:
Is a Sheriff Sale scheduled?:	If yes, when?:
3.) Name of Additional Loan Co. S Address:	Secured against Residence:
Phone Number:	Account Number:
Date Debt Incurred:	Monthly Mortgage Payment:
Who is liable for debt?:	Market Value of Property:
Balance Owned:	Is Anyone Else Liable?: If so, who?
Are Payments Current?:	If not, how far behind?:
Has Mortgage Company begun a F	oreclosure Action?:
Is a Sheriff Sale scheduled?:	If yes, when?:

1.) Name of Car Loan Company	<i>'</i> :
Address:	
Phone Number:	Account Number:
Date Debt Incurred:	Monthly Loan Payment:
Who is liable for debt?:	Market Value of Property:
Balance Owned:	Is Anyone Else Liable?: If so, who?
Are Payments Current?:	If not, how far behind?:
2.) Name of Additional Car Loa	an Company:
Address:	
Phone Number:	Account Number:
Date Debt Incurred:	Monthly Loan Payment:
Who is liable for debt?:	Market Value of Property:
Balance Owned:	Is Anyone Else Liable?: If so, who?
Are Payments Current?:	If not, how far behind?:
1.) Name of Loan Holder:	OTHER SECURED LOANS
Address:	
Phone Number:	Account Number:
Date Debt Incurred:	Who is liable for debt?:
Market Value of Property:	Balance Owned:
Is Anyone Else Liable?:	If so, who?
	Account Number:
	Who is liable for debt?:
	who is hable for debt?
Market Value of Property:	Balance Owned:

# TAXES DUE AND OWING

FEDERAL TAXES	
Describe Tax Due:	
Date Incurred:	Balance Due:
STATE TAXES	
Describe Tax Due:	
Date Incurred:	Balance Due:
	TAXES DUE ON REAL ESTATE
1.) Describe Tax Due:	
Folio #:	Property Address:
Date Incurred:	Balance Due:
2.) Describe Tax Due:	
Folio #:	Property Address:
Date Incurred:	Balance Due:
3.) Describe Tax Due:	
Folio #:	Property Address:
Date Incurred:	Balance Due:
4.) Describe Tax Due:	
Folio #:	Property Address:
Date Incurred:	Balance Due:
	NTITIES HAVE A LIEN AGAINST YOUR PERSONAL OR REAL PROPERTY?  In the date of the lien and amount of lien, etc.:

### YOUR DEBTS - UNSECURED

**PLEASE NOTE:** We must have your Account Number, the address and phone number of each creditor along with your current balance. You MUST supply our office with invoices.

Secured debts are car loans, home loans, equity loans, second mortgage, or any other loans where property is pledges as security. All other types of debts are unsecured.

HAVE ANY OF YOUR UNSECURED YES:	CREDITORS FILED A LAWSUIT AGAINST YOU? NO:
	Complaint served upon you from the Court. in the event a judgment
List All Unsecured Debts Below:	
1.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
2.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
3.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
4.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
5.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	

# Unsecured Creditors – Continued

6.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		
7.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		
8.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		
9.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		
10.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		
11.) Name & Address of Creditor:		
Account No.:	Type of Debt:	
Who is liable for debt?	Balance Owed:	
Date of last use?		

# Unsecured Creditors – Continued

12.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
13.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
14.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
15.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
16.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	
17.) Name & Address of Creditor:	
Account No.:	Type of Debt:
Who is liable for debt?	Balance Owed:
Date of last use?	

LEASES OR CONTRACTS: Are you a party to any leases or contracts? (This includes rental						
agreements and car leases, etc.) Yes: No:						
If yes, list the parties involved and their addresses. If you owe money on these contracts, they						
should be listed on the previous Schedules.						
NAME AND ADDRESS OF THE LEASE/CONTRACT HOLDER & ACCOUNT NUMBER:						
<u>MISCELLANEOUS</u>						
1a.) Have you taken a cash advance within the last six months?						
1b.) Have you taken a cash advance within the last year?						
If you answered yes to the question (s) above, please provide name of Creditor, date of cash						
advance and amount of ash advance:						
2a.) Have you made a major purchase within the last six months?						
2b.) Have you made a major purchase within the last year?						
If you answered yes to the question (s) above, please provide name of Creditor, date of cash						
advance and item purchased, as well as the amount:						
,						
3.) When is the last time you used a credit card?						
Name of Creditor:						
What was purchased?:						
Amount of purchased:						

# **YOUR INCOME**

### YOU MUST SUPPLY OUR OFFICE WITH PAYSTUBS

	DEBTOR	JOINT DEBTOR
Current monthly gross wages, salary Omissions (pro-rate if not paid monthly)		
Estimated monthly overtime		_
Subtract payroll taxes & Social Security		
Subtract Union Dues		
Other payroll deductions (specify)		
Regular monthly income from business or profession		
Monthly income from real property		
Monthly interest & dividends		
Alimony, maintenance or support payments (amt received monthly for debtor's or debtor's dependent's use)		
Social Security or Government Assistance _		
Pension or Retirement		
Other Monthly Income		
How often do you get paid? Please ci	rcle one:	
	Weekly Bi-Weekly Monthly Bi-Monthly	Weekly Bi-Weekly Monthly Bi-Monthly

# **YOUR EXPENSES**

### DEBTOR(S)

Total rent or home mortgage payment:	
-Does this include real estate taxes? Yes No	
-Does this include property insurance? Yes No	
Electricity and Heating Fuel (average monthly)	
Water and Sewer (average monthly)	
Telephone (average monthly)	
Cable (average monthly)	
Other Utilities (average monthly)	
Home Maintenance (repairs & upkeep)	
Food	
Clothing	
Laundry & Dry Cleaning	
Medical & Dental Expenses (not deducted from wages)	
Transportation (not including car payments)	
Recreation, Clubs & Entertainment, Newspapers, Etc.	
Charitable Contributions	
Homeowners/Renters Insurance	
Life Insurance	
Health Insurance	
Auto Insurance	
Other Insurance-Specify	
Taxes not deducted from wages or in Home mortgage payment	
Installment/Auto Payments	
Child Care Expenses	
Tuition for Private School/College	
Alimony, Maintenance, Support to others	
Payments for Dependents not living at home	
Operation expenses	
Other Expenses	

STATEMENT OF FINANCIAL AFFAIRS
Income from employment or operation of business, MUST BE SUPPLIED FOR THE PAST THREE YEARS. Enter each income course for the past three years. Specify the amount of income and the fiscal year.

1.) Source 2002 (Name and Address)	
2.) Source 2003 (Name and Address)	
3.) Source 2004 (Name and Address)	
Amount (Debtor) 2002:	Amount (Debtor) 2003:
Amount (Debtor) 2004:	
4.) Income other than from employment or oper Enter sources of any other income during the pa	
5.) List payments made to creditors during the land insiders within the last year:  Creditor Name & Address:	ast 90 days. Additionally, list payments made to friends, relatives
Date of payment:	Amount Paid:
6.) List any property garnished, attached or seiz Creditor Name & Address:	red during the last year by a creditor:
Date of Seizure:	Description & Value:
7.) List any repossessions, foreclosures and vol Creditor Name & Address:	untary returns during the last year:
Date of Repossession:	Description & Value:
8.) Describe any assignments of property for the Name, Address of Assignee, Date of Assignme	e benefit of creditors made within the last 120 days.  nt and Terms of Assignment or Settlement:

9.) List all property which has been in the hands	of a custodian, receiver or court appointed official during the past
year. Name & Address of Custodian, Name & Lo	ocation of Court, Case Title & Number, Date of Order, Description
& Value of Property:	
10.) List all gifts or charitable contributions made	e during the last year except ordinary & usual gifts to family
members totaling less than \$200.00 per family m	ember and \$100.00 per charitable contribution.
Recipient & Address:	
Relationship (if any): Date	e of gift:
Description and value of gift:	
11.) List all losses from fire, theft, casualty or ga	mbling during the past year.
Description & value of property, circumstances of	of loss, if loss was covered by insurance (give particulars) and date
of loss:	
12.) List all payments made or property transferred	ed by or on behalf of the debtor to any persons, including attorneys
for consultation concerning debt consolidation, re-	elief under the Bankruptcy Law or preparation of a petition in
bankruptcy during the past year.	
Payee Name & Address:	
Date of Payment:	Payor:
13.) List all other property, other than property tr	ransferred in the ordinary course of the business or financial affairs
of the debtor, transferred either absolutely or as s	ecurity during the past year to a creditor or family member.
Transferee/Relationship:	
Date: Describe property tran	nsferred & value received:
14.) List all financial accounts and instruments he	eld by or for the benefit of the debtor which were closed, sold or
otherwise transferred in the past year. Include che	ecking, or other financial accounts, CDs, share accounts held in
bank, credit unions, pension funds, brokerage hor	uses, etc.
Institution Name & Address:	
Account Type & Amount of Final Balance:	Amount & Date of Sale/Closing:
15.) List all setoffs made by any creditor, includi	ng a bank, against a debtor/deposit of the debtor within the past 90
days. Creditor Name & Address:	
Date of Setoff: Ame	
16.) List all property OWNED by another person	that you/your spouse holds or controls.
Owner Name & Address:	
Description & Value of Property:	Location of Property: