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BANKRUPTCY QUESTIONNAIRE

Single Joint
Regs Alts

Debtor's Name (as it appears on Social Security Card):

First Middle Last

Telephone Numbers: Home: _____ Cell: _____ Work: _____

List any other names used in the last 8 years (fka, dba, fdba, married/ maiden names, etc.):

Social Security Number: _____

Address:

Street City Zip Code

Mailing address (if different):

Email _____

Any prior bankruptcies in the last 8 years? Yes No If yes, when _____

If you are filing jointly with your spouse, fill in the following information:

Spouse's Name:

First Middle Last

Telephone Numbers: Home: _____ Cell: _____ Work: _____

List any other names used in the last 8 years (fka, dba, fdba, married/ maiden names, etc.):

Social Security Number: _____

Address:

Street City Zip Code

Mailing address (if different):

Email: _____

REAL PROPERTY

Do you own or are you buying a structural home, mobile home, unimproved land, or a cemetery plot?

Yes No

Please give a brief description of the property (age of dwelling, square footage, acreage, etc.):

Address:

Purchase Date: _____ **Purchase Price:** _____ **Fair Market Value:** _____

Mortgage Name & Address **Acct No. (last 4 digits)** **Amount Owing**

Mortgage Name & Address	Acct No. (last 4 digits)	Amount Owing

Do you own or are you buying any other real estate? Yes No

PERSONAL PROPERTY (FMV = Fair Market Value)

Bank Accounts:

Type: _____ Bank Name & Address: _____ Bal: _____

Type: _____ Bank Name & Address: _____ Bal: _____

Fair Market Value (Garage sale value) of other personal property

Household Appliances and Furniture: _____ Electronics (TVs, computers, etc.): _____ Clothing: _____

Jewelry: _____ Guns: _____ Sporting Equipment: _____

List any unusual property not included above such as Artwork, Collectibles, Musical Instruments, Livestock, Insurance Policies, etc.

If you have a security or rental deposit with landlord, list amount: _____

List IRA's, 401k's, Annuities, Pensions, Profit-Sharing Plans, etc.

Name: _____ Value: _____

Name: _____ Value: _____

Vehicles:

Please list *all* vehicles (even junk & non/op). Please, **be specific with Make/Model information** (such as: sedan, coupe, cab / bed size, model number, engine type, or any options that will assist us in attaining a fair market value from Kelley Blue Book).

Account number is the last 4 digits of your account.

Vehicle #1

Year:	Mileage:	Make:	Model:
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Lien Holder Name & Address:	Owing:	KBB	Last 4 of Acct #:
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Vehicle #2

Year:	Mileage:	Make:	Model:
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Lien Holder Name & Address:	Owing:	KBB	Last 4 of Acct #:
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Vehicle #3

Year:	Mileage:	Make:	Model:
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Lien Holder Name & Address:	Owing:	KBB	Last 4 of Acct #:
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Vehicle #4

Year:	Mileage:	Make:	Model:
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Lien Holder Name & Address:	Owing:	KBB	Last 4 of Acct #:
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Boats/Trailers/Quads (anything else not listed):	\$ Owing	Lien Holder/Account Info
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Value / Description:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you expect a tax refund? Yes No

List all priority debts such as taxes, student loans, child support, & alimony:

Do you have any co-signers or are you a co-signer for another person's debt? Yes No

Do you have a fire claim against PG&E or any other suit for damages you are currently pursuing? Yes No

MONTHLY INCOME

DEPENDENTS

- Married
- Single
- Divorced
- Separated
- Widowed

Name	Age	Relationship

Debtor				Spouse			
Employer				Employer			
Address				Address			
Occupation				Occupation			
Years Employed at Job		Age:		Years Employed at Job		Age:	

<i>Office Use Only</i>	DEBTOR	SPOUSE
GROSS INCOME		
OVERTIME		
TAXES		
INSURANCE		
401k / IRA		
DUES		
OTHER		

Do you receive (list amount):	Debtor	Spouse
Self-Employment Income (beyond your regular paycheck)?	\$	\$
Alimony or Family Support Payments?	\$	\$
Social Security or forms of Government Monetary Assistance (please, be specific)	\$	\$
Retirement or Pension Income?	\$	\$

Do you have any other sources of income? Yes No _____

Are you or your spouse expecting any changes in income next year? Yes No

CURRENT MONTHLY EXPENSES

Do you and your spouse maintain separate households? Yes No

If yes, please fill out one page for each household.

The following questions ask for your monthly expenses. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.), write in the amount and the frequency.

1. \$ _____ **Rent or Home Mortgage** (include rental for mobile home lot or park space)
Does that amount include real estate taxes? Yes No _If no, Amount \$ _____
Does it include property insurance? Yes No _If no, Amount \$ _____

2. \$ _____ **Home Maintenance (including repairs & upkeep)**

3. \$ _____ **Electricity and Heating**

4. \$ _____ **Water and Sewage**

5. \$ _____ **Garbage**

6. \$ _____ **Telephone Service/Cell Phone**

\$ _____ **Internet**

\$ _____ **Cable / Satellite**

\$ _____ **Other Utility**

\$ _____ **Do you have any other utility bills?**

7. \$ _____ **Food**

8. \$ _____ **Clothing / Laundry Expenses**

9. \$ _____ **Personal Care Products**

10. \$ _____ **Medical and Dental Expenses**

11. \$ _____ **Transportation (not including car payments)**

12. \$ _____ **Entertainment, Recreation, Newspapers, Magazines**

13. \$ _____ **Charitable Contributions**

14. INSURANCE – NOT DEDUCTED FROM PAYCHECK

(a) \$ _____ **Life Insurance**

(b) \$ _____ **Homeowner or Renter's Insurance**

(c) \$ _____ **Health Insurance (not deducted from pay)**

(d) \$ _____ **Auto Insurance**

(e) \$ _____ **Other Insurance: Describe: _____**

15. TAXES NOT DEDUCTED FROM PAYCHECK (specify) e.g., Property or Mobile Home Taxes

\$ _____

\$ _____

16. INSTALLMENT PAYMENTS For Cars, Furniture, etc. (specify)

\$ _____

\$ _____

\$ _____

17.\$ _____ **Alimony, Maintenance, Support paid to others (not deducted from pay check)**

18.\$ _____ **Payments for support of dependents not living at home, (i.e., children in college)**

19.\$ _____ **Care for elderly, chronically ill, or disabled family members**

20.\$ _____ **Expenses from Operation of Business**

21.\$ _____ **Court ordered payments not already listed**

22.\$ _____ **Childcare / Education expense for your children under 18**

23.\$ _____ **Pet, Livestock, Vet Expenses**

24.\$ _____ **Non-mandatory contributions to retirement accounts (including loan repayment)**

25.\$ _____ **Other Expenses Not Listed Above**

\$ _____

STATEMENT OF FINANCIAL AFFAIRS

If you are filing jointly, include information about both you and your spouse. If you are filing Chapter 13 and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

1. Income from employment or operation of business: State your gross income from employment or operation of a business.

If you have not received employment income in the TWO YEARS immediately prior to this calendar year, check the appropriate box:

None, Debtor **None, Spouse**

DEBTOR Amount	SPOUSE Amount	Period
\$ _____	\$ _____	YEAR TO DATE FOR 2023
\$ _____	\$ _____	2022
\$ _____	\$ _____	2021

2. Income from sources other than wages or self-employment (i.e., EDD, IRA/401K distributions, Social Security, Gambling Winnings, etc)

DEBTOR	SPOUSE	
Amount	Amount	Period
\$ _____	\$ _____	YEAR TO DATE FOR 2023
\$ _____	\$ _____	2022
\$ _____	\$ _____	2021

3. Payments to Creditors:

Excluding house or car payments, did you pay any creditor more than \$600.00 in the 90 days prior to this case?

YES NO If yes, please list:

<i>Creditor Name & Address</i>	<i>Payment Date(s)</i>	<i>Amount Paid</i>	<i>Amount Owed</i>

3A. ALL DEBTORS: Did you pay any Insiders (relatives, friends, business partners, etc.) in the two years preceding this case? If in doubt, list payments and I'll help you sort it out. YES NO

<i>Name, Address & Relationship to you</i>	<i>Payment Date(s)</i>	<i>Amount Paid</i>	<i>Amount Owed</i>

4. Suits, Executions, Garnishments & Attachments:

A. List all suits to which you are or were a party to within one year of this case:

<i>Case Name & Number</i>	<i>Nature of Proceeding</i>	<i>Court Location</i>	<i>Status / Disposition</i>

B. Describe all property that has been garnished, seized or attached within one year of this case:

<i>Creditor Name & Address</i>	<i>Date of Seizure</i>	<i>Status / Disposition</i>

5. Repossessions, Foreclosures & Returns

List all property that has been repossessed, sold at foreclosure, transferred through a deed in lieu of foreclosure, or returned to seller within one year of this case:

<i>Creditor Name & Address</i>	<i>Date of Sale/ Return/ Foreclosure</i>	<i>Property Address or Description of Repo/ Returned Property</i>

6. Gifts: List all gifts (excluding ordinary gifts to family of less than \$200.00) or charitable contributions over \$100.00 made within one year of this case.

<i>Name, Address & Relationship to you (if any)</i>	<i>Gift Date(s)</i>	<i>Amount Paid</i>	<i>Description</i>

7. Losses: List all losses from theft, fire, gambling or other casualty within one year of this case:

<i>Loss:</i>	<i>Amount:</i>	<i>Date:</i>

8. Payment related to debt counseling or bankruptcy: Did you make payments or transfer property to an attorney, debt relief agency or another person for debt consultation, relief under bankruptcy law, or preparation of petition in bankruptcy within one year prior to this case? YES NO

If yes, please list:

9. Other Transfers (including sale of your property): List any property (including cars or other personal property over \$300.00 in value) sold, transferred, or given away within four years of this case:

<i>Buyer's Name, Address & Relationship to you (if any)</i>	<i>Date of Sale/ Transfer</i>	<i>Property Description & Value Received</i>

10. Closed Financial Accounts: List all bank accounts, stocks, bonds, retirement accounts, etc. that were in your name and closed within one year of this case.

<i>Account Name & Address</i>	<i>Date of Closure</i>	<i>Ending Balance</i>

11. Safe Deposit Box: Have you have a safe deposit or other depository box within one year of this case? YES NO If yes, list contents & value:

12. Setoffs (money taken from your accounts): List all setoffs made by a creditor (including a bank) against a debt or deposit within 90 days of this case:

<i>Creditor Name & Address</i>	<i>Date of Setoff</i>	<i>Amount of Setoff</i>

13. Prior Addresses of Debtor:

Have you lived in California continuously for the last three years: YES NO

If not, list previous addresses within last three years:

14. List names of spouse or former spouses within the last eight years and date of divorce or separation:

15. Self-Employment: Are you now or have you been self-employed in any business in the last six years? If it was in addition to a full-time job, you still need to list it:

<i>Name & Address of Business:</i>	
<i>Beginning & Ending Dates:</i>	
<i>Last 4 digits of Social Security or Taxpayer ID number:</i>	
<i>Nature of Business:</i>	