

Bankruptcy Questionnaire

Instructions

Complete & Return to:

William S. Wolfson, Esq., LLC
1100 Liberty Court
260 Route 202-31
Flemington, NJ 08822
908 782 9333

Bankruptcy is a time honored practice that affords honest debtors the opportunity for a fresh start. Everyone filing a bankruptcy has experienced financial problems beyond his or her control. The court, trustees, and your attorney, understand this and if you comply with their instructions, they will help you out of your financial crisis. In order to help you get the relief to which you are entitled, you **must make full disclosure** of all your financial affairs. Do not try to second-guess the system -- it has been here longer than you.

Be sure to put your name at the bottom of each page. The assets and debts pages also require you to number the pages.

Assets. LIST ALL OF YOUR ASSETS. In all likelihood you will retain most, if not all, of your assets after the bankruptcy. Do not jeopardize your discharge by omitting anything. You can list assets by groups of similar property, e.g. "furniture", "clothing", "personal effects", etc. Your attorney will tell you how large or small your groupings can be.

Unless instructed otherwise by your attorney, do not fill in the parts surrounded by gray -- the attorney will fill in that part. If you own real estate, unless instructed otherwise, attach a copy of your legal description to these forms. (You can find your legal description on your deed, mortgage, purchase agreement, or tax statements).

Debts. LIST ALL OF YOUR DEBTS. You may plan to repay some creditors, including relatives and friends, but you must nevertheless list them as creditors. Your attorney can discuss with you the procedure for "reaffirming" a debt to a creditor or how to go about repaying your relatives or friends. If you have debts that are disputed, list them. If you have potential debts for which no one has yet made a direct claim against you, list them. If in doubt as to whether a creditor should be listed, list them. LIST ALL OF YOUR DEBTS. Failure to list a creditor can result in you not being discharged of your obligation to that creditor.

You will be given several sheets with spaces for listing creditors. As with assets, unless instructed otherwise by your attorney, do not fill in the parts surrounded by gray. In determining the "fair market value" of collateral, use the amount you could sell the collateral for, NOT what you paid for it.

Executory Contracts. These are contracts such as leases, real estate contracts, health clubs, time-shares, etc., for which either or both parties to the contract have not yet fully performed their obligations under the contract. In all likelihood you should also list these parties as creditors too.

Codebtors. Your codebtors are obligated to pay the debts you do not. For most people, a codebtor is just someone who cosigned a loan. However, partners, spouses and others who are not part of your petition may be liable on many of your debts without actually cosigning anything. If this is your situation you will need to attach additional sheets listing all debts for which someone else may be jointly liable.

Income. If you are employed, attach a typical recent pay stub to the section on Income. If your income varies, attach several representative paystubs that show the range of your pay. If you are self-employed or you are a corporation or partnership, attach a financial statement showing your monthly income.

Expenditures. Your ability to file a Chapter 12 or 13 reorganization depends upon the accuracy of your estimated living expenses. The Chapter 7 trustee scrutinizes budgets for abuse. The court, trustees, and your attorney know what a reasonable budget for families in your area is. If, after using your best efforts, you cannot determine what your expenses are, your attorney can give you some guidelines as to what is considered reasonable.

If you are a partnership or a corporation, submit a financial statement indicating your monthly expenses. Individuals who are in business for themselves should include a detailed statement of their business expenses in addition to the personal expenses called for in this questionnaire.

Client Name: _____

Filing Status (attorney use only – debtors go to next section)

Venue	<input type="checkbox"/> Domicile <input type="checkbox"/> Pending case of affiliate	___ Individual ___ Joint ___ Partnership ___ Corporation ___ Corporation (public) ___ Municipality Other _____	___ Consumer ___ Business	___ Single ___ Married ___ Divorced ___ Separated ___ Widow ___ Widower
Filing Fee	<input type="radio"/> Attached <input type="radio"/> To be paid in installments	Chapter _____		
Small Bus. 11	<input type="checkbox"/> As defined in 11 USC §101 <input type="checkbox"/> §1121(e) election			
Attv Fee paid		Petition date		
Attv Fee promised				

Name, Address, ID	Debtor (husband, if joint filing)	Joint Debtor (wife, if joint filing)
Full Name		
All other names used by you in the last 6 years (include married, maiden and trade names)		
Street Address (Number, street, city, state & zip)		
Mailing address, if different from street address		
County of residence or principal place of business		
Soc. Security No., Tax ID No. (If more than one, state all)		
Case Caption (if other than debtors' name(s))		

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Client Name: _____

Prior Bankruptcies

Location where filed	Case No	Date filed
Location where filed	Case No	Date filed

If more than 2 prior bankruptcies, attach a continuation

Pending Bankruptcies

List all pending bankruptcies filed any spouse, partner or affiliate

Name of debtor	Case No	Date filed
District	Relationship	Judge
Name of debtor	Case No	Date filed
District	Relationship	Judge

Employment

Debtor (husband, if joint filing)

Joint Debtor (wife, if joint filing)

Occupation		
Name of Employer		
Employer's Address		
How long employed		

Dependents

Name	Age	Relationship
Name	Age	Relationship
Name	Age	Relationship

If more than 3 dependents, attach a continuation sheet

Client Name: _____

Assets

Summarize everything you own and its value below. If greater detail is required, your attorney may have attached additional sheets. In reviewing the following items, be sure to follow any special instructions such as itemizing or providing further details in your description. How items are classified may affect what exemptions you are entitled to, so if you do not know how to classify a particular item, ask your attorney to help.

Real Property _____

Personal Property

1. Cash on hand _____
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives _____

3. Security deposits with public utilities, telephone companies, landlords, and others. _____

4. Household goods and furnishings, including audio, video, and computer equipment _____

5. Books, Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles _____
6. Wearing apparel _____
7. Furs and jewelry _____
8. Firearms and sports, photographic, and other hobby equipment _____
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each _____
10. Annuities. Itemize and name each issuer _____
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize _____
12. Stock and interests in incorporated and unincorporated businesses. Itemize _____

13. Interests in partnerships or joint ventures. Itemize _____
14. Government and corporate bonds and other negotiable and non-negotiable instruments _____
15. Accounts receivable _____
16. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars _____

17. Other liquidated debts owing debtor including tax refunds. Give particulars _____

18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property. _____
19. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust _____
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each _____

21. Patents, copyrights, and other intellectual property. Give particulars _____
22. Licenses, franchises, and other general intangibles. Give particulars _____
23. Automobiles, trucks, trailers, and other vehicles and accessories _____

24. Boats, motors, and accessories _____
25. Aircraft and accessories _____
26. Office equipment, furnishings, and supplies _____
27. Machinery, fixtures, equipment, and supplies used in business _____

28. Inventory _____
29. Animals _____
30. Crops - growing or harvested. Give particulars _____
31. Farming equipment and implements _____
32. Farm supplies, chemicals, and feed _____
33. Other personal property of any kind not already listed _____

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Description	Location (if other than debtor's residence)	Fair Market Value (List what you can sell it for, not what your paid for it) \$
Type of Property (If real estate enter "real". Otherwise enter 1 – 33 from above list) <div style="border: 1px solid black; width: 50px; height: 30px; display: inline-block; vertical-align: middle;"></div>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Exemption (Statute, if any) <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
		Exemption amount claimed \$ <div style="border: 1px solid black; width: 100%; height: 20px;"></div>
If there are liens on this item, list the name of each holder and the amount of his claim. If more than 3, attach a continuation sheet		
Lien holder	Amount of lien \$	(Circle one): Surrender Reaffirm Redeem Void Retain
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Creditor Name & Address	Date Incurred	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Codebtor <input type="checkbox"/> Setoffs? <input type="checkbox"/> Exec Contract <input type="checkbox"/> Notice Only	Creditor No.
Account No.	Class Circle One: Sec'd §507(a)() Unsec'd Circle One: H W J C		
Amount Due \$	Remarks	Amt entitled to priority \$	
Assignee Name & Address	Consideration	Office Use Only	
Describe collateral (security)	Fair Mkt Value \$	Nature of Lien	Superior liens \$

Creditor Name & Address	Date Incurred	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Codebtor <input type="checkbox"/> Setoffs? <input type="checkbox"/> Exec Contract <input type="checkbox"/> Notice Only	Creditor No.
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Describe collateral (security)	Fair Mkt Value \$	Nature of Lien	Superior liens \$

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Executory Contracts

If more than 3 executory contracts, attach additional sheets

Name and address of Party

Description of Contract

Contract is a lease for NONRESIDENTIAL real property

Government contract no.,
if any

Name and address of Party

Description of Contract

Contract is a lease for NONRESIDENTIAL real property

Government contract no.,
if any

Name and address of Party

Description of Contract

Contract is a lease for NONRESIDENTIAL real property

Government contract no.,
if any

Codebtors

If more than 3 codebtors, attach additional sheets

Name and address of Codebtor

Creditor to whom Codebtor may be liable

Other names by which Codebtor is known

Name and address of Codebtor

Creditor to whom Codebtor may be liable

Other names by which Codebtor is known

Name and address of Codebtor

Creditor to whom Codebtor may be liable

Other names by which Codebtor is known

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Client Name: _____

Income (Individuals Only)

- MONTHLY** You get paid once each month..... 12 checks per year
- SEMI-MONTHLY** You get paid twice each month, e.g. 1st & 15th..... 24 checks per year
- BI-WEEKLY** You get paid every other week, e.g. every other Friday..... 26 checks per year
- WEEKLY** You get paid once each week..... 52 checks per year

Income from your paystub

Other Monthly Income

Debtor's Income (Husband, if joint filing)

Gross Income	<input type="text"/>
Estimated Overtime	<input type="text"/>
Payroll Deductions	
Federal Income Tax	<input type="text"/>
State Income Tax	<input type="text"/>
FICA/Medicare	<input type="text"/>
Insurance	<input type="text"/>
Union Dues	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>

From your business	<input type="text"/>
From real property	<input type="text"/>
Interest & Dividends	<input type="text"/>
Alimony, child support	<input type="text"/>
Social Security, Gov- ernment Assistance	<input type="text"/>
Pension or retirement	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>

Explain any anticipated increase or decrease in income of more than 10% in the next year.

Expenditures (Individuals Only)

Rent or Mortgage	<input type="text"/>
<input type="checkbox"/> Insurance is included	
<input type="checkbox"/> Taxes are included	
Utilities	<input type="text"/>
Electricity & Heat	<input type="text"/>
Water & Sewer	<input type="text"/>
Telephone	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
Home maintenance	<input type="text"/>
Food	<input type="text"/>
Clothing	<input type="text"/>
Laundry & Dry Cleaning	<input type="text"/>
Medical & Dental Expenses	<input type="text"/>
Transportation (Do NOT include car payments)	<input type="text"/>
Recreation	<input type="text"/>
Charitable contributions	<input type="text"/>

Insurance	<input type="text"/>
Homeowners	<input type="text"/>
Life	<input type="text"/>
Health	<input type="text"/>
Auto	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
Taxes	<input type="text"/>
Installment pmts (not in plan)	<input type="text"/>
Auto	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
_____	<input type="text"/>
Other, specify	<input type="text"/>
Alimony, maintenance, support	<input type="text"/>
Payments for dependents	<input type="text"/>
Business expenses	<input type="text"/>
Other expenses (specify)	<input type="text"/>
_____	<input type="text"/>

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Client Name: _____

Statement of Financial Affairs

If you are married and filing a joint petition, include information for both spouses. If you are married and plan to file under chapter 12 or 13 then you must furnish information for both spouses whether or not you plan to file a joint petition, unless you are separated and plan to file individually. If you are engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, you should also provide the information requested on this statement concerning all such activities as well as your

Answer all questions. If the answer to any question is "None," or the question is not applicable, mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the number of the question.

REMEMBER, for all questions, if you are married and filing under chapter 12 or chapter 13 you must include information applicable to either or both spouses whether or not a joint petition is filed, unless you are separated and a joint petition is not to be filed.)

1. Income from employment or operation of business

State the gross amount of income you have received from employment, trade, or profession, or from operation of your business from the beginning of this calendar year to the present. State also the gross amounts received during the **two years** immediately preceding this calendar year. (If you maintain, or have maintained, financial records on the basis of a fiscal rather than a calendar year you may report fiscal year income. Identify the beginning and ending dates of your fiscal year) If a joint petition is to be filed, state income for each spouse separately.

	YEAR	AMOUNT	SOURCE (if more than one)	FISCAL YEAR <small>(if other than calendar year)</small>
Debtor (H)	This year	\$		
		\$		
		\$		
Wife	This year	\$		
		\$		
		\$		

2. Income other than from employment or operation of business

State the amount of income received by you other than from employment, trade, profession, or operation of your business during the **two years** immediately preceding the filing of this case. Give particulars. If a joint petition is filed, state income for each spouse separately.

	YEAR	AMOUNT	SOURCE (give particulars)
Debtor (H)		\$	
		\$	
Wife		\$	
		\$	

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Client Name: _____

NONE

3. Payments to creditors

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case.

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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NONE

b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors, who are or were insiders*.

*The term "insider" includes but is not limited to: your relatives; general partners and their relatives; corporations of which you are an officer, director, or person in control; officers, directors, and any person in control of a corporate debtor and their relatives; affiliates of yours and insiders of such affiliates; any managing agent of yours.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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Client Name: _____

4. Suits and administrative proceedings, executions, garnishments and attachments

NONE

a. List all suits and administrative proceedings to which you are or were a party within **one year** immediately preceding the filing of this bankruptcy case.

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS DISPOSITION	OR
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NONE

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the filing of this bankruptcy case.

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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Statement of Financial Affairs

Client Name: _____

5. Repossessions, foreclosures and returns

NONE

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and receiverships

NONE

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case.

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
---------------------------------	-----------------------	---

NONE

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the filing of this bankruptcy case.

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

NONE

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

NONE

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.**

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCE AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

NONE

List all payments made or property transferred by or on behalf of you to any person, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case or since the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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10. Other transfers

NONE

a. List all other property, other than property transferred in the ordinary course of your business or financial affairs, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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11. Closed financial accounts

NONE

List all financial accounts and instruments held in your name or for your benefit which were closed, sold or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share account held in banks, credit unions, pensions funds, cooperatives, associations, brokerage houses and other financial institutions.

NAME AND ADDRESS OF INSTITUTION	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
------------------------------------	--	--

12. Safe deposit boxes

NONE

List each safe deposit or other box or depository in which you have or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAME AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

NONE

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within **90 days** preceding the commencement of this case.

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

NONE

List all property owned by another person that you hold or control.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

NONE

If you have moved within the **two years** immediately preceding the commencement of this case, list all premises which you occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, also list any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

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Client Name: _____

16. Spouses and Former Spouses

NONE

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, 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

NONE

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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NONE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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NONE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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Statement of Financial Affairs

Page 8 of 9 pages (12 pages if "in business")

Client Name: _____

18. Nature, location and name of business

NONE

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	TAXPAYER I.D. NUMBER	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES OF OPERATION
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NONE

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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