

OREGON FRESH START

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BANKRUPTCY QUESTIONNAIRE

(Individual debtor)

I have attempted to make this questionnaire as simple as possible to complete. The information required in this form is information that is required to prepare a bankruptcy petition for filing with the court. You must make a full disclosure of all of your financial affairs. If you do not and I find out about it, I am required to notify the court and you will be required to sign corrected documents for filing with the court. Depending upon the nature of the corrected information, the court may do nothing or the court may dismiss your bankruptcy. In addition, the FBI investigates bankruptcy crimes. Federal law provides severe penalties for bankruptcy crimes, which include bribery, hiding assets, making false statements, making fake claims, filing under a false name and perjury. Title 18, United States Code, Sec. 152, et. seq. provides penalties of up to 5 years imprisonment or a fine of not more than \$250,000 or both. The bottom line - **FILL THIS FORM OUT ACCURATELY!**

In completing this questionnaire, you will be asked for information concerning yourself, your assets, your debts, your income, your expenses and your general finances. If any section requests information that does not pertain to you, skip that section.

GENERAL INFORMATION

Name	
Other names used in the last 8 years	
Social Security Number	
Street Address	
City, County, State, Zip	
Mailing Address	
City, State, Zip	
Home phone	
Email Address	
Name of Employer	
Address	
City, State, Zip	
Work phone	
Occupation	
How long employed	

Marital Status

Single
 Married
 Married but separated

OTHER PEOPLE WHO LIVE WITH YOU

NAME	AGE	RELATIONSHIP

Have you ever filed bankruptcy?

Yes No

If "Yes," complete the following

YEAR	STATE	CHAPTER

ASSETS

BANKRUPTCY LAW REQUIRES YOU TO LIST EVERYTHING YOU OWN OR ARE BUYING EVEN IF YOUR NAME IS NOT ON THE TITLE

The asset section is divided into three parts:

1 - Real estate –this includes the following

A - land you own or are buying

B - a house on land you own or are buying

C- a lease with an option to buy

2 - Vehicles – this includes cars, trucks, motorcycles, ATVs, mobile homes on land you rent and manufactured homes on land you rent

3 - Other personal property – this includes all other property like clothes, furniture, bank accounts, etc

REAL ESTATE

List below all of the real estate (land) in which you have any interest. The value is the "market value" - what you think you could sell it for in its present condition taking into consideration the present real estate market.

PROPERTY 1

Street address	
City, State, Zip	
Market value	
Balance of mortgage	
Date of mortgage	
Amount behind on payments	
Do you want to keep this property	
Name(s) of other owners of property	

PROPERTY 2

Street address	
City, State, Zip	
Market value	
Balance of mortgage	
Date of mortgage	
Amount behind on payments	
Do you want to keep this property	
Name(s) of other owners of property	

PROPERTY 3

Street address	
City, State, Zip	
Market value	
Balance of mortgage	
Date of mortgage	
Amount behind on payments	
Do you want to keep this property	
Name(s) of other owners of property	

VEHICLES

Bankruptcy law requires you to list all vehicles you own or are buying even if the title is under someone else's name. For value, list what you think you would pay for the car in its present condition which includes dents, scratches, upholstery damage, mechanical problems, dirt, faded paint, etc.

VEHICLE 1

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

VEHICLE 2

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

VEHICLE 3

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

VEHICLE 4

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

VEHICLE 5

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

VEHICLE 6

Year	
Make	
Model	
Name(s) on title	
Name of lender if you owe money	
Amount owed	
Amount behind on payments	
Do you want to keep the vehicle	

PERSONAL PROPERTY

Bankruptcy law requires that you list all personal property you own or are buying even if the title is in the name of someone else. For value, you need to list what you think it would cost you to buy the property in its present condition from a person who sells that kind of property. For example, for furniture or clothing, you could use the cost of buying the furniture/clothing at Goodwill. Remember, everything you own is used. Some of it may be in need of repair so make sure you take into consideration the condition of the property. Used stuff is not worth much.

1 - Cash

VALUE	NAMES OF OTHER OWNERS

2 - Security deposits

Name of company or landlord	
Names of other owners of deposit	
Amount of deposit	

Name of company or landlord	
Names of other owners of deposit	
Amount of deposit	

Name of company or landlord	
Names of other owners of deposit	
Amount of deposit	

3 - Furniture

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

4 - Books/Pictures

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

5 - Clothing

VALUE

6 - Jewelry

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

7 - Life Insurance (complete this only if you can borrow money on the policy)

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

8 - Annuities

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

9 - Pension/profit sharing

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

10 - Interest in partnerships

VALUE	NAME OF PARTNERSHIP

11 - Government bonds

VALUE	NAMES OF OTHER OWNERS	LOAN BALANCE

12 - Money owed to you (do not include child support or alimony)

AMOUNT OWED	NAME OF PERSON WHO OWES MONEY

13 - Alimony or child support owed to you

AMOUNT OWED	NAME OF PERSON WHO OWES MONEY

14 - Tax refunds owed to you

AMOUNT OWED	WHO OWES YOU THE REFUND

15 - Interest in an estate of someone who has died

AMOUNT

NAME OF PERSON WHO DIED

16 - Claims you have against someone where you could sue them

AMOUNT OF CLAIM

NAME OF PERSON YOU COULD SUE

17 - Patents/copyrights

VALUE

NAMES OF OTHER OWNERS

--	--

18 - Licenses/franchises

VALUE

NAMES OF OTHER OWNERS

--	--

19 - Airplanes

VALUE

NAMES OF OTHER OWNERS

LOAN BALANCE

--	--	--

20 - Office equipment

VALUE

NAMES OF OTHER OWNERS

LOAN BALANCE

--	--	--

21 - Tools used in your employment

VALUE

NAMES OF OTHER OWNERS

LOAN BALANCE

--	--	--

22 - Tools around the house not used in employment

VALUE

NAMES OF OTHER OWNERS

LOAN BALANCE

--	--	--

23 - Inventory for any business you own

VALUE

NAMES OF OTHER OWNERS

LOAN BALANCE

31 - Boats/motors/trailers

DESCRIPTION VALUE NAMES OF OWNERS LOAN BALANCE

32 - Other personal property

DESCRIPTION VALUE NAMES OF OWNERS LOAN BALANCE

DEBTS

Bankruptcy law requires you to list **ALL** debts. This includes money you owe your father, mother, brother, Aunt Jane and Uncle Joe. There are three different kinds of debts:

SECURED (property is collateral for the debt and can be taken if the debt is not paid). Examples are houses, cars, furniture, tires from Les Schwab, etc

PRIORITY - usually taxes and child support or alimony

UNSECURED - credit cards, medical bills, utility bills, etc.

PRIORITY DEBT (TAXES)

Debt 1

Name of creditor	
Address of creditor	
City, State, Zip	
Amount owed	
What years are taxes for	
Did you file your tax returns on time	

Debt 2

Name of creditor	
Address of creditor	
City, State, Zip	
Amount owed	
What years are taxes for	
Did you file your tax returns on time	

Debt 3

Name of creditor	
Address of creditor	
City, State, Zip	
Amount owed	
What years are taxes for	
Did you file your tax returns on time	

Debt 4

Name of creditor	
Address of creditor	
City, State, Zip	
Amount owe	
What years are taxes for	
Did you file your tax returns on time	

PRIORITY DEBT (SUPPORT)

DEBT 1

Name of person who is owed money	
Address of person	
City, State, Zip	
Amount of past due support owed	
State where support owed	
Account #	

Debt 2

Name of person who is owed money	
Address of person	
City, State, Zip	
Amount of past due support owed	
State where support owed	
Account #	

SECURED DEBT (REAL ESTATE)

DEBT 1

Address of property	
City, State, Zip	
Who owns property (husband, wife, joint)	
Name of creditor	
Address of creditor	
City, State, Zip	
Value of property	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

DEBT 2

Address of property	
City, State, Zip	
Who owns property (husband, wife, joint)	
Name of creditor	
Address of creditor	
City, State, Zip	
Value of property	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

Debt 3

Address of property	
City, State, Zip	
Who owns property (husband, wife, joint)	
Name of creditor	
Address of creditor	
City, State, Zip	
Value of property	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

Debt 4

Address of property	
City, State, Zip	
Who owns property (husband, wife, joint)	
Name of creditor	
Address of creditor	
City, State, Zip	
Value of property	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

SECURED DEBT (VEHICLES)

DEBT 1

Description of vehicle	
Name of creditor	
Address of creditor	
City, State, Zip	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this vehicle	

Debt 2

Description of vehicle	
Name of creditor	
Address of creditor	
City, State, Zip	
Who owes debt	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this vehicle	

Debt 3

Description of vehicle	
Name of creditor	
Address of creditor	
City, State, Zip	
Who owes debt	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this vehicle	

Debt 4

Description of vehicle	
Name of creditor	
Address of creditor	
City, State, Zip	
Who owes debt	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this vehicle	

Are any of the above leases rather than loans? yes No

If you answered "yes" describe below which debts are leases

SECURED DEBT (FURNITURE, TIRES, ETC)

DEBT 1

Description of collateral	
Name of creditor	
Address of creditor	
City, State, Zip	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

Debt 2

Description of collateral	
Name of creditor	
Address of creditor	
City, State, Zip	
Value	
Amount owed	
Date of loan	
Name(s) of cosigners	
Address of cosigners	
City, State, Zip	
How much behind on payments	
Do you want to keep this property	

UNSECURED DEBT

If you have any co-debtors on any of these debts, answer the question at the end of this section. If you need more space to list your debts, make copies of these pages as necessary.

CREDIT CARDS

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

Name of credit card creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) charges were made on this account	

OTHER UNSECURED DEBTS

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

Name of creditor	
Address of creditor	
City, State, Zip	
Account #	
Balance owed	
Year(s) balance on this account became due	
Describe nature of debt (medical, utility, loan, etc)	

CURRENT MONTHLY INCOME

Monthly gross income	
LESS: taxes/ss	
LESS: insurance	
LESS: union dues	
LESS: other	
MONTHLY TAKE HOME	
What are your pay days	

OTHER MONTHLY INCOME

Net business income	
Rentals	
Interest	
Support received	
SS	
Welfare/food stamps	
Pension/retirement/VA	
Other	

Income from working for the past 6 months. List gross (before any deductions) amounts

Last month	
Previous month	
Previous month	
Previous month	
Previous month	
Previous month	

Describe income received by any people who live with you	
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If you have anyone who lives with you that has income, do they give any of that income to you to help you pay your living expenses?
 ___ Yes ___ No

If you answered "yes" answer below

How much do you receive each month from people who live with you	
--	--

GENERAL FINANCIAL INFORMATION

1. Have you charged more than \$1000 on any credit card within the last 6 months?

___ Yes ___ No

If you answered "yes" complete the following

Name of creditor	Amount charged

2. Have you obtained an unsecured loan from a bank or finance company within the last 6 months?

___ Yes ___ No

If you answered "yes" complete the following

Name of bank/finance company	Amount borrowed

3. How much income have you earned from working in the following years?

2008	
2007	
2006	

4. Have you received income during the last 2 years from sources other than working?

___ Yes ___ No

If you answered "yes" complete the following

Year	Amount	Source
this year		
last year		

5. Not counting car payments or house payments, have you paid more than \$600 to any **ONE** creditor in the last 90 days?

___ Yes ___ No

If you answered "yes" complete the following

Name of creditor	Amount paid	Date paid

6. Have you repaid any loans from relatives in the last year?

___ Yes ___ No

If you answered "yes" complete the following

Name of relative	
Relationship	
Address	
City, State, Zip	
Amount paid	

Name of relative	
Relationship	
Address	
City, State, Zip	
Amount paid	

7. Has anyone sued you in the last year?

___ Yes ___ No

If you answered "yes" complete the following

Name of creditor	
Name of attorney for creditor	
Address of attorney	
City, State, Zip	
County where law suit filed	
Case # of law suit	

Name of creditor	
Name of attorney for creditor	
Address of attorney	
City, State, Zip	
County where law suit filed	
Case # of law suit	

8. Has anyone garnished your wages or bank account within the last 90 days?

___ Yes ___ No

If you answered "yes" complete the following

Name of creditor	Date of garnishment	Amount garnished

9. Has anything been repossessed by or returned to a creditor in the last year?

Yes No

If you answered "yes" complete the following

Name of creditor	
Address of creditor	
City, State, Zip	
Description of item repossessed	
Date of repossession	

10. Have you given any property to a creditor in the last 120 days for the creditor to hold as collateral for a loan you already had with the creditor?

Yes No

If you answered "yes" complete the following

Name of creditor	
Address of creditor	
City, State, Zip	
Description of item	
Date given to creditor	

11. Has any of your property been controlled by a custodian, receiver or court-appointed official in the last year?

Yes No

If you answered "yes" complete the following

Name of custodian	
Address of custodian	
City, State, Zip	
Name of court	
City, State, Zip	
Case title	
Case number	
Description of property	
Value of property	

12. Have you made any gifts to a charity or church in the last year of more than \$100?

___ Yes ___ No

If you answered "yes" complete the following

Name of charity	
Address of charity	
City, State, Zip	
Date of gift(s)	
Value of gift(s)	

Name of charity	
Address of charity	
City, State, Zip	
Date of gift(s)	
Value of gift(s)	

13. Have you made any gifts to family members during the last year more than \$200?

___ Yes ___ No

If you answered "yes" complete the following

Name of family member	
Address of family member	
City, State, Zip	
Relationship of family member	
Date of gift(s)	
Value of gift(s)	

Name of family member	
Address of family member	
City, State, Zip	
Relationship of family member	
Date of gift(s)	
Value of gift(s)	

14. Have you suffered any losses from fire, theft or gambling in the last year?

___ Yes ___ No

If you answered "yes" complete the following

Describe event	
Date of event	
Amount of loss	
Describe event	
Date of event	
Amount of loss	

15. Other than payments to Dale L Smith for help with this bankruptcy, have you made any payments or transferred any property to anyone for consultation concerning debt consolidation, debt repayment or help with a bankruptcy petition?
 Yes No

If you answered "yes" complete the following

Name of person	
Address of person	
City, State, Zip	
Amount paid	
Date(s) of payment	

16. Have you sold, traded or transferred any property in the last year?
 Yes No

If you answered "yes" complete the following

Name of person	
Address of person	
City, State, Zip	
Description of property	
Date of transfer	
Value of property	

Name of person	
Address of person	
City, State, Zip	
Description of property	
Date of transfer	
Value of property	

17. Have you closed any bank accounts in the last year?
 Yes No

If you answered "yes" complete the following

Name of bank	
Type of account	
Date account closed	
Balance at time of closing	

Name of bank	
Type of account	
Date account closed	
Balance at time of closing	

18. Do you have a safe deposit box?
 Yes No

Have you had a safe deposit box in the last year?
 Yes No

If you answered "yes" to either question complete the following

Name of bank	
City, State	
Description of contents	
Names of persons who have access to safe deposit box	

19. Do any of your creditors also owe you money?
 Yes No

If you answered "yes" did any of those creditors cancel your debt rather than have you pay the debt?
 Yes No

If you answered "yes" complete the following

Name of creditor	
Address of creditor	
City, State, Zip	
Amount owed to creditor	
Date of cancellation	

20. Do you have in your possession any property that belongs to another person?
 yes No

Do you control any property that belongs to another person?
 Yes No

If you answered "yes" to either question complete the following

Name of other person	
Address of other person	
City, State, Zip	
Description of property	

Name of other person	
Address of other person	
City, State, Zip	
Description of property	

21. Have you moved in the last 2 years?

___ Yes ___ No

If you answered "yes" complete the following

Address	
City, State, Zip	
Date from/////date to	

Address	
City, State, Zip	
Date from/////date to	

Address	
City, State, Zip	
Date from/////date to	

22. Within the last 6 years have you lived with a wife/husband in Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington or Wisconsin?

___ Yes ___ No

If you answered "yes" complete the following

Name of spouse	
State where lived	
Date(s)	

23. Has any governmental agency given you any written notice that you may have violated an environmental law relating to pollution, hazardous waste or groundwater contamination?

___ Yes ___ No

If you answered "yes" complete the following

City, State of site	
---------------------	--

Name of governmental agency	
Date of notice	

24. Have you given any notice to a governmental agency that you have released a hazardous material?
 Yes No

If you answered "yes" complete the following

City, State of site	
Name of governmental agency	
Date of notice	

25. Have you been a party to any court or administrative proceeding involving the violation of an environmental law?
 Yes No

If you answered "yes" complete the following

Name of agency	
Case Number	
Results	

26. Have you been involved as an officer, director, partner or managing executive of a corporation, partnership or sole proprietorship in the last 6 years?
 Yes No

If you answered "yes" complete the following

Name of business	
Address of business	
City, State, Zip	
tax ID # of business	
Nature of business	
When did business begin operation	
Is the business still operating	
When did business close	
Name of any accountant for business	
Address of accountant	
City, State, Zip	
Date services performed	
Name of any banks given a financial statement of the business	
Name of any other partners	
Name of any other partners	

27. Within the last 6 years, have you owned more than 5% of the stock of any corporation?

___ Yes ___ No

If you answered "yes" complete the following

Name of business	
Address of business	
City, State, Zip	
tax ID # of business	

28. Are you leasing any property (vehicle, house, apartment)?

___ Yes ___ No

If you answered "yes" complete the following:

Name of creditor or landlord	
Address	
City, state, zip	
Description of property leased	

Name of creditor or landlord	
Address	
City, state, zip	
Description of property leased	

Name of person completing questionnaire	
Date of completion	
Is all information true and correct	