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#### **BANKRUPTCY QUESTIONNAIRE**

This information is deemed confidential and protected by the attorney-client privilege. Such information is not intended by client to be produced or discoverable by any third parties, as it is a communication made to an attorney for the purpose of obtaining or using legal services, and is made with an expectation of confidentiality.

Indicate the type of petition being filed:  [ ] Unmarried individual.  [ ] Married and joint.	
[ ] Married but individual petition. Name of individual _ [ ] Check here if married but separated or if sepa	rate households are maintained.
Please Complete the Following Information:	If married and filing jointly, Spouse's Info.:
Full Legal Name (First, Middle, Last, Jr., Sr, II, etc) If not your legal first name, what name do you go by?	Full Legal Name Any other names, or maiden name, used in the past?
DOB:	DOB:
SSN:	SSN:
Residence Address:	Mailing Address (if different):
County:	

If not GEORGIA, indicate your State of residence exactly 2 YEARS ago?

Contact Information:	How did you find our firm?:
Husband's Phone:	[ ] Referral from friend or family.
Wife's Phone:	[ ] Phone Book or Yellow Pages.
Husband's Work Phone:	Our Website or Internet.
Wife's Work Phone:	[ ] Other:
Husband's E-Mail:	
Wife's Email:	
Emergency Contact:	
Prior Bankruptcies: Were you ever involved in	a prior bankruptcy case or Chapter 13 case (Wage Earner Plan)?
Yes No	
Case number(s):	Chapter: [Circle one] 7 or 13
Date(s) filed:	
Location of Court:	
Disposition of each case: [ ] Dismissed;	[ ] Discharged; Date:
Is your spouse involved in any bankruptcy c	ase or chapter 13 case that is still going on?
REAL ESTATE & DEBTS AGAI	INST REAL ESTATE: HIP INTEREST IN REAL ESTATE / LAND: □ No □ Yes.
If YES, Describe and give the location you hold an interest:	n of all real property (lot, house, land, burial plot, etc.) in which
How is this Property Titled?	
[ ] Husband's name only; [ ] Wife	's name only; [ ] Jointly owned between husband and wife; or
[ ] Jointly owned by	with
Information about value:	
Approximate month/year purchased:	/ Price Paid \$
Fair Market Value (if known) from Co	ounty Tax bill or website: \$
	\$
Assuming lower value is better, and w	with the understanding that I need to protect your home, what is the any known problems or needed repairs that would impact value?

Mortgage Company (Name	e):		
Lender's Address (IMPO)	<i>RTANT</i> ):		
•	Balance Owed/ Payo		
	e monthly mortgage payment		/Mo
now much are the		-	payments: \$
Are you aware of			so, describe and alert attorney):
Other Loans on House (2 <sup>nd</sup>	Mortgage or HELOC): Lenc	der Name:	
Lender's Address (IMPO)	,		
\$	Balance Owed/ Payo		
How much are the	e monthly mortgage payment	s: \$	/Mo.
	If not current, how f	far behind are the	payments: \$
	Name & A	ddress of HOA fo	ant – I need the Name and Address): or Notices & Payments:
Yearly Dues: \$			
Amt Owed Now S	S		
ARE PROPERTY TAXES	CURRENT? IF NOT, STA	TE THE APPRO	XIMATE YEARS/AMOUNTS OWED:
County:			
Year(s) Owed:	Approxima	ate Total: \$	
*********	********	**********	********
TULL DISCLOSURE OF A	ASSETS IS IMPORTANT:	DESCRIBE YOU	UR <u>PERSONAL PROPERTY</u> :
ırniture, clothing, automobil	es, etc. Please provide an ap	proximate dollar	of your personal property, such as value for the categories that apply to "new" or "replacement") values.
ousehold Furniture:	\$	Rental Securit	ry Deposits: \$
isc. Electronics:	\$	If you have a	
earing apparel:	\$	Insurance Polithe Cash Surr	icy, what is ender Value:\$
timated Value of Jewelry  Check if you have a special vering theft or loss of any varies.		Check he	r Pension: \$ re if you have <i>inherited</i> a 401(k)/IRA
		Stock or secur	rities: \$

Firearms and sports equipment:	\$	LLC's an Calc C Company in a company
Cash on hand:	\$	LLC's or Sub-S Corporations you own: % or Shares: Name of Entity:
Checking Acct Balance (Avg.)	\$	
Bank Name:		
Savings Account Balance (Avg.)	\$	Inheritance expected due
Bank Name:		to a recent death? \$ Check here if you will inherit from anyone
NOTE: PLEASE NOTIFY US TO ANY BANK WHERE YO OR SAVINGS ACCOUNT:		who is critically ill, or likely to pass soon.  Are you owed money? If so, describe:
		Animals / Pets. Number of: Dogs Cats
Projected Tax Refund this Year	\$	Describe below any college accounts you've set up for children, or custodial accounts or accounts you're on merely as an authorized signer:
whether you have filed it yet or	not, you MUST DISCLOS sserting the claim under t	possible lawsuit against a person or company, SE it here as a possible asset. If you fail to disclose it, he doctrine of <i>judicial estoppel</i> . <i>If you have any doubt</i>
Do you have cause to sue someon a member of a class action, or for injured in an automobile accident	injuries to yourself or other	damage to your property, for money owed to you, or as r members of your family? (For example, you were f another driver.)
YES		
	NO	
If YES, please provide the follow		
If YES, please provide the follow  Existing or Potential Lawsuit(	ving information:	
Existing or Potential Lawsuit(s) Who Could You Sue (or	ving information:	
Existing or Potential Lawsuit(	ving information:	
Existing or Potential Lawsuit( Who Could You Sue (or Who Have You Sued)?  How Much Money is	ving information:	
Existing or Potential Lawsuit(s) Who Could You Sue (or Who Have You Sued)?  How Much Money is Involved?	ving information:	
Existing or Potential Lawsuit(s) Who Could You Sue (or Who Have You Sued)?  How Much Money is Involved? Please Explain what happened, whether a lawsuit	ving information:	
Existing or Potential Lawsuit(s) Who Could You Sue (or Who Have You Sued)?  How Much Money is Involved?  Please Explain what happened, whether a lawsuit has been filed, and the name	ving information:	
Existing or Potential Lawsuit(s) Who Could You Sue (or Who Have You Sued)?  How Much Money is Involved? Please Explain what happened, whether a lawsuit	ving information:	

Other than Vehicles, do you have any valuable assets, not described above, worth \$500 or more? Describe:

## VEHICLES (Cars, trucks, motor homes, motorcycles, ATV's etc.):

go in Part 2 just below this part): Year & Type: Appox. Mileage: Approx. Blue-Book Value: 2. LOANS WITH VEHICLES AS COLLATERAL: (See www.KBB.com or www.NADAGuides.com for the current value of your car.... Make sure to use "Private Party" value, not trade-in value.) Vehicle #1: (Year & Type of Vehicle) (Approx. Mileage) Approximate Month and Year of Purchase: Terms of vehicle loan: Monthly Payment of \$ for months at % APR. Approx. Value (Blue Book): \$\_\_\_\_ Name & Address of Lien holder or Bank: Approx. Balance Owed: \$\_\_\_\_ How far behind are payments? months. Do you want to keep this vehicle? \_\_\_\_\_ Vehicle # 2: (Year & Type of Vehicle) (Approx. Mileage) Approximate Month and Year of Purchase: Terms of vehicle loan: Monthly Payment of \$\_\_\_\_\_ for \_\_\_\_ months at \_\_\_\_\_ % APR. Approx. Value (Blue Book): \$\_\_\_\_\_ Name & Address of Lien holder or Bank: Approx. Balance Owed: \$\_\_\_\_ How far behind are payments? \_\_\_\_\_ months. Do you want to keep this vehicle? \_\_\_\_\_ Vehicle #3: (Year & Type of Vehicle) (Approx. Mileage) Approximate Month and Year of Purchase: Terms of vehicle loan: Monthly Payment of \$\_\_\_\_\_\_ for \_\_\_\_\_ months at \_\_\_\_\_\_% APR. Name & Address of Lien holder or Bank: Approx. Value (Blue Book): \$ Approx. Balance Owed: \$ How far behind are payments? \_\_\_\_ months.

1. PAID-FOR VEHICLES: List all Vehicles that you own Free-and Clear (vehicles with loans against them

Do you want to keep this vehicle?

Vehicle # 4:	(Year & Type of Vehic	le)		(A <sub>1</sub>	pprox. Mileage)	
	Approximate Month an	d Year of Purchase:				
	Terms of vehicle loan:	Monthly Payment of	\$ for	r	months at	% APR.
	Name & Address of Lie	en holder or Bank:	Approx. Va	ılue (Blue Bo	ook): \$	
					Owed: \$	
			How	far behind a	re payments?	months.
			Do y	ou want to k	eep this vehicle?	
IST ANY JUDGME		S THAT HA	VE FILED A	<u>LAWS</u>	<i>UIT</i> OR O	BTAIN
Name and address of	of creditor or attorney:	H, W or J	Approx. Judgment	Amt.	County & App	orox Date:
			\$			
			\$			
_			\$		\$	
			Ψ		Ψ	
ut only if we idgments or	know about it.	Equifax, Expation about the	en. Bankruptcy perian & TransU em, so it's impor e owed. I/we filed a and all tax returns	Union no rtant to all tax ret s were file	o longer repo list them abo urns. (Skip to d. (Complete t	ort ove. next sectio he info. be
NCOME I			1	e returns	for the following	ng years:
	s owed, if any, to <u>I</u>	NTERNAL REVEN	NUE SERVICE:			L 0
	s owed, if any, to <u>It</u> Tax Year:	NTERNAL REVEN		Amo	ount of Tax/Pena	·
	_	VTERNAL REVEN  Was a Retu	NUE SERVICE:	Amo		

Amounts owed, if any, to the GEORGIA I	DEPARTMENT OF REVE	<u>NUE</u> :
Tax Year:	Was a Return Filed on ti	me? Amount of Tax/Penalty Owed:
		<u> </u>
		¢.
		¢.
CHILD SUPPORT OR ALI	MONY PAYMEN	TS:
IMPORTANT: Name and addres	s of recipient of support:	Amount of Arrears Owed, if Any:
		\$
		Ψ
STUDENT LOANS:		
Do you have any Student Loans?	Ves No	0
If yes:	105	<i></i>
Name & Address of Creditor	Total Amount Owed	Monthly payment or Deferred
		J 1 J

# ALL OTHER DEBT - UNSECURED DEBT (Credit Cards, Med Bills, Etc.):

The easiest way to furnish your list of creditors is simply by providing a copy of your free credit report:

### For a Free Credit Report go to: www.AnnualCreditReport.com

- Only order your free annual credit report. Do not pay for any extras, like your score, or credit monitoring, etc. Extras aren't worth the cost.
- Only try for one at a time. Even if we have 1 report, it's better than none.
- If you don't save and/or print the report quickly, it will refresh after 15 minutes, whereupon it's gone, and you can't retrieve it again at all.
- The best way to print or save is to click the "print report" link or icon, which brings it up in actual PDF format. Another way is to Right click the mouse and in the menu that opens, in the drop down where you select the printer, choice print to PDF or Save as PDF. You can then email the report to us without wasting paper and ink.

NOTE: Carefully review your credit report to make sure it includes the debts you owe. In particular, please make sure to separately provide a list of any MEDICAL BILLS or HOSPITAL BILLS that you owe (but don't appear on your credit report), as medical providers rarely report debts to the credit bureaus!!

# LEASES OR PENDING CONTRACTS

→ 11 you re	ent your home or apartmen	it please ind	licate:		
Nan	ne & Address of Landlord:				
Dog	you wish to assume this lease			s. [ ] No.	
→ If you ha	ave leased furniture or elec	etronics, like	e Aarons or I	Rent-A-Center, ple	ease indicate:
Nan	ne & Address of Lessor:				
Wha	at are you Leasing?				
Terr	ns of Lease:	\$	per	until	
Dog	you wish to assume this lease	e & keep pay	ying? [ ] Yes	s. [ ] No.	
CO-SIGNED I	DEBTS:				
Please indica	te whether you have co-sign	ed for some	one, or if som	eone has co-signed	for you. If so:
Which Debts	? (Include address if not alre	ady above):			
	oortant! ne & Address of the Co-Deb	tor:			

#### BUDGET: EMPLOYMENT, HOUSEHOLD SIZE, INCOME AND EXPENSES

NOTE: Please complete the following information for you and your spouse, <u>even if your spouse</u> <u>is not filing with you.</u>

Hu	sband or Self	Wife or Significate Other
Age:		
Occupation:		
Employer Name:		
How Long Employed There?:		
Employer Address:		
name, age and relationship more is		
YOUR HISTORY / TREND	OF INCOME OVER T	HE PAST 6 MONTHS:
Gross (Before Deductions) Income Last Month:	<b>Husband \$</b>	Wife: \$
Gross Income (all sources that month) 2 Months Ago:	Husband \$	Wife: \$
Gross Income (all sources that month) 3 Months Ago:	Husband \$	Wife: \$
Gross Income (all sources that month) 4 Months Ago:	Husband \$	Wife: \$
Gross Income (all sources that month) 5 Months Ago:	Husband \$	Wife: \$
Gross Income (all sources that month) 6 Months Ago:	Husband \$	Wife: \$

Describe basis for recent or expected changes in income (in recent past or near future) for better or worse:

## YOUR CURRENT PROJECTION OF YOUR INCOME AND PAYROLL DEDUCTIONS (MONTHLY)

Please multiply as needed to put ALL numbers on this page on a MONTHLY basis. For example, if you're paid weekly, multiply each item on your check by 4.33.

If you're paid every 2 weeks, then multiply each item by 2.17

	Debtor	Joint Debtor <i>or</i> Non-Filing Spouse
<i>Monthly</i> gross wages (before deductions for taxes, etc.), salary or commissions (Pro-rate if not paid monthly.)	\$	\$
Estimated <i>Monthly</i> Overtime.	\$	\$
Amount Deducted <i>Monthly</i> for Taxes and Social Security.	-(\$	) -(\$ )
Amounts (if Deducted from Pay) for:		
Health Insurance (per month):	-(\$	) -(\$
Life Insurance (per month):	-(\$	) -(\$
Dental Insurance (per month):	-(\$	) -(\$
Disability Insurance (per month):	-(\$	) -(\$
401(k) Deduction (per month):	-(\$	) -(\$
Child Support you Pay via Payroll Deduction (per month, not per pay period; See top of page):	-(\$	) -(\$
Other Payroll Deductions (Specify).	-(\$	) -(\$
Monthly Gross Income from Operation of a Business (Describe).	\$	\$
Monthly Income from Rental Property.	\$	\$
Monthly Dividends or Interest.	\$	\$
Amount Received Monthly as Income for Alimony or Child Support.	\$	\$
Social Security or Govt. Assistance.	\$	\$
Pension or Retirement.	\$	\$
Other Monthly Income (Specify).	\$	\$

### YOUR MONTHLY LIVING EXPENSES

Rent or home mortgage payment:		\$
If <u>not</u> included in pmt above: <b>property taxes</b> (D	ivide annual amt. by 12):	\$
If not included in mortgage payment, cost of hor	neowner's insurance:	\$
Second Mortgage Pmt. <u>OR</u> Homeowners Assoc	iation Dues (Specify):	\$
Electricity:		\$
Water and sewer:		\$
Telephone (average monthly):		\$
Cable Television:		\$
Heating Gas:		\$
Garbage Service:		\$
Home Maintenance (repairs and upkeep):		\$
Food:		\$
Clothing:		\$
Laundry and Dry Cleaning:		\$
Medical and dental expenses (including prescrip	otions):	\$
Gasoline for vehicle(s):		\$
Life Insurance (not deducted from paycheck):		\$
Health Insurance (not deducted from paycheck)	:	\$
Auto Insurance:		\$
Other Insurance (Specify):		\$
Income Taxes (monthly) IF NOT deducted from	n a paycheck:	\$
Alimony or Child Support (if not already deduc	ted from paycheck):	\$
Daycare Expense (Monthly):		\$
Pet Food / Vet Bills:		\$
Automobile Maintenance & Tags:		\$
Church Donations / Tithes:		\$
Payments on debts that you'll continue to make E.g., Car payments, Student Loans, Etc.	or need to incur soon: Amount:	
	\$	
	\$	
	\$	

# **IF YOUR SPOUSE IS** <u>NOT</u> **FILING A CHAPTER 13 OR CHAPTER 7 JOINTLY WITH YOU**, PLEASE COMPLETE THE FOLLOWING FOR HIS OR HER SEPARATE BILLS (IF ANY): Examples are car payments, furniture payments, credit card payments, etc.

STATEM	\$\$  \$\$  \$\$  \$\$  IENT OF FINANCL		
	\$ \$		
	\$ \$		
	\$	AT 43	
		AT AT	
STATEM	IENT OF FINANCI	AT A1	
(DODTANT DI			
YEAR-TO-DATE INCOME (1	This is your income from I	Jan. 1st	to the present date).
sband's Year-to-Date Income:	\$	_ [	] Actual or [ ] Estimated
fe's Year-to-Date Income:	\$	_ [	] Actual or [ ] Estimated
LAST YEAR'S INCOME (This	s figure can be ascertained	l from y	our tax returns).
sband's Income Last Year:	\$	_ [	] Actual or [ ] Estimated
fe's Income Last Year:	\$	_ [	] Actual or [ ] Estimated
PREVIOUS YEAR'S INCOM	E (This figure can be asce	rtained	from your tax returns).
sband's Income:	\$	_ [	] Actual or [ ] Estimated
fe's Income:	\$	_ [	] Actual or [ ] Estimated
	well as your income for the partial poide this information.  YEAR-TO-DATE INCOME (Instantion)  Separate of the partial state of the par	well as your income for the past two years. The Court wide this information.  YEAR-TO-DATE INCOME (This is your income from 3 sband's Year-to-Date Income:  fe's Year-to-Date Income:  LAST YEAR'S INCOME (This figure can be ascertained sband's Income Last Year:  fe's Income Last Year:  PREVIOUS YEAR'S INCOME (This figure can be ascertained sband's Income:  sband's Income:  \$	YEAR-TO-DATE INCOME (This is your income from Jan. 1st sband's Year-to-Date Income: \$ [ fe's Year-to-Date Income: \$ [ LAST YEAR'S INCOME (This figure can be ascertained from y sband's Income Last Year: \$ [ fe's Income Last Year: \$ [ PREVIOUS YEAR'S INCOME (This figure can be ascertained sband's Income: \$ [

sale of property, dividends from stocks, etc.)

Creditor	Date of Payment	Amount Paid	Account Bala
		\$	\$
		\$	\$
		\$	\$
For a period of time that covers the last two to transfers or sales, whether it's for money, or you made out of the ordinary, or transfers / sa was for fair value (for example, if you sold you newer one and got credit for blue book value) such sales or transfers and did not get full and and affection, or transfers to avoid having produced by the produced by the sales of transfers. Description should value of what was transferred, and value — if	r for trade, etc. This dale of real estate, etc., the our house after listing it. Most importantly, yell fair market value in coperty taken by creditor directly include the date(s), the	hat you've made to that you've made to the with a realtor, or you must let us known onsideration (like rs, or quit claim do the Transferee, who	also, to any pay o anyone, even if traded in a cow if you've magifts made for eeds, etc.):
Have you been served with a lawsuit (before JUDGMENT being entered against you, or has If yes, it is <i>URGENT</i> that you provide our of (1) <b>Copies of all court papers</b> ; <i>or</i> (2) The following information for each suit or	ave you been garnished fice (if you haven't alr	1?	that resulted in
JUDGMENT being entered against you, or has If yes, it is <i>URGENT</i> that you provide our of	ave you been garnished fice (if you haven't alror garnishment:	eady) with either:	
JUDGMENT being entered against you, or has If yes, it is <u>URGENT</u> that you provide our of (1) Copies of all court papers; or (2) The following information for each suit or	ave you been garnished fice (if you haven't alrest garnishment: endant(s) name(s)] and	eady) with either:  CASE NUMBER	:
JUDGMENT being entered against you, or had If yes, it is <u>URGENT</u> that you provide our of (1) Copies of all court papers; or (2) The following information for each suit of Caption of the Suit [Plaintiff's name and Defe	ave you been garnished fice (if you haven't alrest garnishment: endant(s) name(s)] and any (Example: Superior of	eady) with either:  CASE NUMBER  Court of Bartow C	:

Creditor	Date of Repossession or Foreclosure	Description/Value of Property
List all property OWNED by	another person that you (or you and you	ur spouse) hold or control.
Owner (Name & Address)	Description & V Property	Value of Location of Propert
If you have moved within the Address:	last TWO years, list all premises occup	ied during that period.  Dates of Occupancy:
connections to any business?  ☐ A sole proprietor or self-en ☐ A member of a limited liab ☐ A partner in a partnership ☐ An officer, director, or man	ed for bankruptcy, did you own a busine aployed in a trade, profession, or other a lility company (LLC) or limited liability aging executive of a corporation the voting or equity securities of a corp	activity, either full-time or part-tim partnership (LLP)
connections to any business?  ☐ A sole proprietor or self-en  ☐ A member of a limited liab  ☐ A partner in a partnership  ☐ An officer, director, or man  ☐ An owner of at least 5% of	apployed in a trade, profession, or other a ility company (LLC) or limited liability	activity, either full-time or part-tim partnership (LLP) oration
connections to any business?  A sole proprietor or self-en A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of Check all that apply above and	apployed in a trade, profession, or other a sility company (LLC) or limited liability traging executive of a corporation the voting or equity securities of a corporation of the fill in the details below for each busing	activity, either full-time or part-tim partnership (LLP) oration
connections to any business?  A sole proprietor or self-en A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of Check all that apply above and Business Name	apployed in a trade, profession, or other a sility company (LLC) or limited liability traging executive of a corporation the voting or equity securities of a corporation of the fill in the details below for each busing	activity, either full-time or part-time partnership (LLP) oration ess.
connections to any business?  A sole proprietor or self-en A member of a limited liab A partner in a partnership An officer, director, or man An owner of at least 5% of Check all that apply above and Business Name  Number Street	apployed in a trade, profession, or other a sility company (LLC) or limited liability maging executive of a corporation the voting or equity securities of a corp d fill in the details below for each busin	activity, either full-time or part-time partnership (LLP) oration ess.
connections to any business?  A sole proprietor or self-en  A member of a limited liab  A partner in a partnership  An officer, director, or man  An owner of at least 5% of  Check all that apply above and  Business Name  Number Street  City State ZIP Code	apployed in a trade, profession, or other a sility company (LLC) or limited liability tragging executive of a corporation the voting or equity securities of a corput fill in the details below for each busin E.I.N. or Tax II	octivity, either full-time or part-time partnership (LLP)  oration  ess.  D#