

QUESTIONNAIRE

Gresham Family & Bankruptcy Law
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(503) 492-4229

SECTION A

Name (include middle) _____

Street Address, City, and Zip Code _____

Mailing Address (if different) _____

Home Telephone _____ Work Telephone _____

Cell _____ Email Address _____

* * * * *

Spouse's name _____

Street Address, City, and Zip Code _____

Mailing Address (if different) _____

Home Telephone _____ Work Telephone _____

Cell _____ Email Address _____

Other names you have used in last 6 years _____

Do you have any dependants? ____ How many? ____ Age/Sex? _____

How many people live in your household? ____ How much do they contribute to household expenses? _____

Have you ever filed any other bankruptcies? Yes ____ No ____ If so, where? _____

What was the date it was filed? _____ Case Number? _____.

When do you want to file your case? _____

Which chapter did we discuss filing for you? Chapter 7 _____ or Chapter 13 _____

SECTION B

Your Real Property (house or land)

Do you or your spouse own a house or other real property: Yes ____ No _____. If no, skip to next section.

Address _____

Is this your residence? Yes _____ No _____

Value (what can you sell it for) _____ Why do you think it is worth this amount? (Appraisal, opinion of real estate broker, your own estimate, etc.) _____

How much do you owe on it? First Mortgage: _____ Second Mortgage: _____

Who holds the First Mortgage and what is their address? _____

Who holds the Second Mortgage and what is their address? _____

Are you behind on any payments? Yes _____ No _____.

If yes, how many months are you behind on the first mortgage? _____

On the second mortgage? _____

SECTION C

Your Personal Property

**PLEASE LIST ALL PROPERTY YOU OWN OF ANY KIND
YOU MUST LIST A DOLLAR VALUE FOR ALL PROPERTY
 Additional space available on back of this page.**

Type of Property	Yes/No	Description and Location	Value
1. Cash on hand:			\$
2. Checking, savings or other financial accounts (include name of your bank) certificates of deposit or shares in banks, savings and loans, thrifts, building & loan, and homestead associations, or credit unions, brokerage houses or cooperatives			\$
3. Security deposits with public utilities, telephone companies, landlords & others.			\$
4. Household goods & furniture including audio, video, & computer equipment			\$
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc and other collections or collectibles.			\$
6. Clothing			\$
7. Furs & Jewelry (list the type of jewelry and include costume jewelry)			\$
8. Firearms, sports, photography and other hobby equipment. (Be specific and list separately)			\$
9. Insurance policies. List company and cash value.			\$
10. Annuities.			\$

11. Retirement Plans (Specify if it is a IRA, 401K, etc.)			\$
12. Stocks and interest in incorporated or unincorporated businesses.			\$
13. Interests in partnerships and joint ventures.			\$
14. Government and corporate bonds and other negotiable and non-negotiable instruments.			\$
15. Accounts receivables (unpaid wages, money owed to you, etc).			\$
16. Alimony, support or property settlements which you are or may be entitled to.			\$
17. Any other debts owed to you including TAX REFUNDS.			\$
18. Equitable or future interests, life estates in property and other rights or powers that may be exercised by you.			\$
19. Interest in an estate of someone who has died (inheritance), death benefit plan, life insurance or trust.			\$
20. Any debt that may be owed to you even if you are not sure how much it may be (Example: someone injured you in a car wreck and you have not filed suit yet).			\$
21. Patents, copyrights or other intellectual property.			\$
22. Licenses, franchises, other intangible property.			\$

23. Automobiles, trucks, trailers and other vehicles (Please indicate the model type such as LX, DX, LE, etc.)		Make _____ Model _____ Year _____ Miles _____	\$
		Make _____ Model _____ Year _____ Miles _____	\$
		Make _____ Model _____ Year _____ Miles _____	\$
24. Boats, motors and accessories.			\$
25. Aircraft and accessories.			\$
26. Machinery, fixtures, equipment and supplies used in business and tools used in your trade or occupation.			\$
27. Inventory.			\$
28. Animals.			\$
29. Crops whether growing or harvested.			\$
30. Farming equipment and implements.			\$
31. Farm supplies, chemicals and feed.			\$
32. Any other personal property of any kind that you have not listed above.			\$

SECTION D

Your Creditors

LIST OF SECURED CREDITORS

(Car loans, some purchases on department store cards, furniture purchases, etc.)

Additional space available on back of this page.

Creditor Name & Address Account # List Original creditor first then Collection Agency in next box with a complete mailing address for both.	Describe the Collateral	Amount owed Value of the Collateral	Co-Debtor Name & Address
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	

LIST OF UNSECURED CREDITORS
 (Credit Cards, Medical Bills, Utilities, etc. Most debts will be listed here)
 Additional space available on back of this page.

List Original creditor first then any Collection Agency in the next box with a complete mailing address for both.

Creditor Name, Address & Account number	Type of Debt	Amount Owed	Co-Debtor name & address, if any
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	

Creditor Name, Address & Account number	Type of Debt	Amount Owed	Co-Debtor name and address, if any
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	

Creditor Name, Address & Account number	Type of Debt	Amount Owed	Co-Debtor name and address, if any
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	
Creditor _____ Account Number _____ Name _____ Address _____ City _____ State ____ Zip _____		\$ _____ Amount Owed \$ _____ Value	

TAX DEBTS

Federal Taxes	Amount owed	When Return Filed/Comments
Year _____	: _____	: _____
Year _____	: _____	: _____
Year _____	: _____	: _____
Year _____	: _____	: _____
State Taxes	Amount owed	When Return Filed/Comments
Year _____	: _____	: _____
Year _____	: _____	: _____
Year _____	: _____	: _____
Year _____	: _____	: _____

SECTION E

Income and Expenses

Husband

Wife

Occupation Title _____
How Long Employed _____
Employer's Name _____
Employer Address _____
Hourly Rate _____
Average Hours Worked Per week _____

Gross Monthly Income From Employment _____

Overtime _____

Deductions

a. Tax & S.S. _____

b. Union Dues _____

c. Insurance _____

d. Other _____

Describe "other" _____

OTHER INCOME

Business Income _____

Real Property Income _____

Interest & Dividends _____

Alimony/child support _____

Social Security _____

Unemployment _____

Pension/Retirement _____

Other _____

Specify source of other income _____

Do you anticipate an increase in income of 10% or more in the next year _____.

If yes, explain _____

MONTHLY EXPENSES

Rent or Mortgage	\$ _____	Second Mortgage	\$ _____
Taxes Included?	Yes _____	No _____	
Insurance Included?	Yes _____	No _____	
Electricity and heating fuel	\$ _____		
Water/Sewer	\$ _____		
Telephone	\$ _____		
Cable TV	\$ _____		
Cell Phone	\$ _____		
Internet	\$ _____		
Home Maintenance	\$ _____		
Food	\$ _____		
Clothing	\$ _____		
Laundry/Dry Cleaning	\$ _____		
Medical & Dental	\$ _____		
Transportation	\$ _____	(gas, oil changes, tires, maintenance)	
Recreation, entertainment	\$ _____	(newspapers, movies, etc.)	
Charitable Contributions/tithing	\$ _____		
Homeowner Insurance	\$ _____		
Life Insurance	\$ _____		
Health Insurance (not deducted from pay check)	\$ _____		
Auto Insurance	\$ _____		
Other Insurance	\$ _____		
Property Tax	\$ _____		
Car Payment	\$ _____		
Second Car Payment	\$ _____		
Other installment payments	\$ _____		
Please describe:	_____		
Alimony/spousal support	\$ _____		
Child support	\$ _____		
Business expenses	\$ _____	(please attach detailed list of business expenses)	
Hair cuts/hair care	\$ _____		
Toiletries	\$ _____		
Bank charges/fees	\$ _____		
School Lunches	\$ _____		
Other _____	\$ _____		

SECTION F

Miscellaneous Information

None _____ 1. Employment or business income for the year:

2016 _____ 2017 _____ 2018 _____
2016 _____ 2017 _____ 2018 _____

None _____ 2. List income from all other sources other than employment or business for the past 2 years. (unemployment, Child support, 401K distribution, Social Security, etc.)

2016 Source of Income _____ Amount \$ _____
2016 Source of Income _____ Amount \$ _____
2017 Source of Income _____ Amount \$ _____
2017 Source of Income _____ Amount \$ _____
2018 Source of Income _____ Amount \$ _____
2018 Source of Income _____ Amount \$ _____

None _____ 3.a. List any creditors you have paid a total of \$600 or more to in the last 3 months. (For example, a house payment or car payment of \$200 per month or more or a balance transfer from one credit card to another)

Creditor _____ Dates and amount paid _____ \$ _____

Creditor _____ Dates and amount paid _____ \$ _____

Creditor _____ Dates and amount paid _____ \$ _____

Creditor _____ Dates and amount paid _____ \$ _____

None _____ 3.b. List any payment you made to family members, business partners, friends, etc. within the last year.

Name/Address: _____
Dates Paid: _____ Amount \$ _____

Name/Address: _____
Dates Paid: _____ Amount \$ _____

Name/Address: _____
Dates Paid: _____ Amount \$ _____

None _____ 4.a. List any lawsuits you have been involved with within the last year.

Court location _____ Case Number _____
Names of Parties _____

Court location _____ Case Number _____
Names of Parties _____

None _____ **4.b. Describe any property that has been garnished or seized within the last year.**

Creditor Name _____ Date seized or garnished _____
Amount \$ _____

Creditor Name _____ Date seized or garnished _____
Amount \$ _____

None _____ **5. List all property that has been repossessed, foreclosed or sold in the last year.**

Creditor Name _____ Date of Repo/Foreclosure _____
Value of Property \$ _____

Creditor Name _____ Date of Repo/Foreclosure _____
Value of Property \$ _____

Creditor Name _____ Date of Repo/Foreclosure _____
Value of Property \$ _____

Creditor Name _____ Date of Repo/Foreclosure _____
Value of Property \$ _____

None _____ **6.a. Describe any property that has been assigned for the benefit of any creditor within that last 120 Days such as wage assignment.**

Creditor Name _____
Describe Property assigned _____

Creditor Name _____
Describe Property assigned _____

None _____ **6.b. List any property that has been in the hands of a receiver, custodian or court-appointed individual within the last year** _____

None _____ **7. List all gifts or charitable contributions, including tithing to a church, made within the last year except for gifts of \$100 or less made to family members.**

Name _____ Type of Gift _____ Value \$ _____
Date(s) _____

Name _____ Type of Gift _____ Value \$ _____
Date(s) _____

None _____ 8. List all losses from fire, theft, other casualty or gambling with the last year.

Please list the value of the item(s) and when and where the loss occurred.

Name _____ Type of Gift _____ Value \$ _____
Date(s) _____

Name _____ Type of Gift _____ Value \$ _____
Date(s) _____

None _____ 9. List any payments or transfers of property made to anyone for consultation concerning debt consolidation or Bankruptcy (i.e. Consumer Credit, attorneys, paralegals)

Name: Gresham Family & Bankruptcy Law
Dates _____ Amounts \$ _____

Name: _____
Dates _____ Amounts \$ _____

None _____ 10. List any property of any kind you have transferred for any reason other than in the normal course of your affairs within the last year. (For example, selling or trading a car.)

Type of Property _____ Date Transferred/Sold _____
Value Received \$ _____ Name of buyer/transferee _____

Type of Property _____ Date Transferred/Sold _____
Value Received \$ _____ Name of buyer/transferee _____

None _____ 11. List all financial accounts (checking, savings, brokerage accounts, etc.) closed within the last year. Please list the address of your branch.

Name of Bank/Institution _____
Address _____
Date Account Closed _____ Final balance when closed \$ _____

Name of Bank/Institution _____
Address _____
Date Account Closed _____ Final balance when closed \$ _____

Name of Bank/Institution _____
Address _____
Date Account Closed _____ Final balance when closed \$ _____

None _____ 12. List any safe deposit boxes you have.

Name of Bank/Institution _____
Address _____
Describe Contents _____
Names of other people with access _____

Name of Bank/Institution _____
Address _____
Describe Contents _____
Names of other people with access _____

None _____ 13. List any setoffs made by any creditor against a debt or deposit of yours within the last 90 days. (For example, a tax refund being applied to a tax debt)

Name of Creditor _____
Amount taken \$ _____ Date of Setoff _____

Name of Creditor _____
Amount taken \$ _____ Date of Setoff _____

None _____ 14. List any property you are borrowing, keeping or holding for another person. Include the name and address of the owner and the description and value of the property. (For example, are you borrowing a car?)

Name of Owner _____
Address _____
Description of Property _____ Value \$ _____

Name of Owner _____
Address _____
Description of Property _____ Value \$ _____

None _____ 15. List all other address you have lived at for the last 3 years. Include the dates at each address and the name you used there.

Address _____
Dates resided there: From _____ To _____

Address _____
Dates resided there: From _____ To _____

Address _____
Dates resided there: From _____ To _____

Address _____
Dates resided there: From _____ To _____

None _____ 16. List any businesses you have owned or operated in the past 2 years.
Include dates of operation.

Name of Business _____
Address _____
Dates of Operation: From _____ To _____
Type of Business _____

Name of Business _____
Address _____
Dates of Operation: From _____ To _____
Type of Business _____

Name of Business _____
Address _____
Dates of Operation: From _____ To _____
Type of Business _____

None _____ 17. List the names and ages of all your dependents and their relation to you.

Name _____ Age _____
Relation to You _____

Name _____ Age _____
Relation to You _____

Name _____ Age _____
Relation to You _____

Name _____ Age _____
Relation to You _____

Name _____ Age _____
Relation to You _____

None _____ 18. Are there any liens of any kind on your home or other property including your belongings? If so, please list the liens below.

None _____ 19. Do you have any leases, rent to own agreements or other contracts?
If yes, list name and address of other party and type of lease or contract.

Name _____
Address _____
Type of Contract _____

None _____ 20. Have you ever received an inheritance or do you think you may receive an inheritance within the next year?

None _____ 21. Do you have a 401K loan or a loan against any other retirement plan? If so, please provide the name and address of the company where the payments are sent.

Name of Company _____
Address _____

Name of Company _____
Address _____

None _____ 22. Have you ever owned a house or land other than the property you listed on page one? If so, what happened to the property?

**When you have this questionnaire completed,
please mail, fax, or drop it off at our office.**

Thank you!