

BANKRUPTCY QUESTIONNAIRE

WARNING:

Our job is to help you get the protection and relief you deserve under the Federal Bankruptcy laws. Your job is to provide us with information that is both complete and truthful. We will use the information you provide to prepare the Official Court forms necessary to get your case filed. Failure to provide information which is as complete and accurate as possible will delay the filing of your case and may constitute a Federal crime.

All information that you are required to provide in preparation of the petition and thereafter during your case is required to be complete, accurate and truthful.

All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in section 506 must be stated in those documents where requested after reasonable inquiry to establish such value.

Current monthly income, the amounts specified in section 707(b)(1), and, in a case under chapter 13 of the bankruptcy code, disposable income (determined in accordance with section 707(b)(2)), are required to be stated after reasonable inquiry.

Information that you provide during your case may be audited pursuant to the bankruptcy code, and failure to provide such information may result in dismissal of the case under the bankruptcy code or other sanction, including criminal sanction.

HOW TO FILL OUT THE QUESTIONNAIRE:

- Can you read and write O.K.? If not, please let us know so that we can provide extra assistance.
- Please fill out this questionnaire as best you can. If you want, we can provide this service, but there would be an extra charge of \$100.00 for this level of service.
- If you need extra space for an answer, feel free to write on the back of the page or include additional pages.
- If you are filing a case with your spouse (a joint filing), please make sure you provide answers for both you and your spouse.
- Please write neatly, so we can read your answers.
- Please answer each and every question, and fill in each blank.
- If your answer is "**No**" or "**None**", write "No" or "None" in the blank.
- If an item does not apply to you, simply write "**Not Applicable**" or "**N/A**" in the space provided.
- If you do not know exact dates or exact amounts, put in the best answer you can.
- If you are not sure how to answer a question, answer it as best you can. If you simply do not understand a question, write "**Don't understand**" or "**???**" in the blank.
- Make a list of any questions you have about the information requested in this Questionnaire. When you come back into our office, we will try to answer your questions.

WORKSHEET: YOUR PROPERTY

REAL ESTATE

Real Estate is land and things permanently attached to land. Included are unimproved land, vacation cabins, condominiums, duplexes, rental property, business property, mobile home park spaces, agricultural land, airplane hangars, and any other buildings permanently attached to land. It also includes property you are entitled to by a trust and all property in which you have any legal, equitable, or future interest. If you are in a community property state, your spouse's real estate is also owned by you.

LOCATION OF PROPERTY Attach Copy of Recorded Deed and mortgage(s) Last Tax Bill or Appraisal	FAIR MARKET VALUE/ BALANCE OWED	MONTHLY PAYMENT/ INTEREST RATE	CREDITOR NAME AND ADDRESS 1ST MORTGAGE	CREDITOR NAME AND ADDRESS 2ND MORTGAGE/HOME EQUITY
Main Home: Address-	FMV \$ _____	1 st Mortgage \$ Interest ____%		
	Balance Owed 1 st - \$ _____ 2 nd - \$ _____	2 nd Mortgage \$ Interest ____%		
Vacation Home: Address-	FMV \$ _____	1 st Mortgage \$ Interest ____%		
	Balance Owed 1 st - \$ _____ 2 nd - \$ _____	2 nd Mortgage \$ Interest ____%		
Timeshare: Address-	FMV \$ _____	1 st Mortgage \$ Interest ____%		
	Balance Owed 1 st - \$ _____ 2 nd - \$ _____	2 nd Mortgage \$ Interest ____%		
Other Real Estate: Address-	FMV \$ _____	1 st Mortgage \$ Interest ____%		
	Balance Owed 1 st - \$ _____ 2 nd - \$ _____	2 nd Mortgage \$ Interest ____%		
Other Real Estate: Address-	FMV \$ _____	1 st Mortgage \$ Interest ____%		
	Balance Owed 1 st - \$ _____ 2 nd - \$ _____	2 nd Mortgage \$ Interest ____%		

VEHICLES

Includes Cars, Boats, Motorcycles, ATV, 4-Wheeler, Snowmobile, Trailer, Camper, Aircraft
 Proof of value can be obtained online at Kelley Blue Book - www.kbb.com or www.nada.com We need the private party value. **PLEASE PRINT A COPY.**

YEAR/MAKE/MODEL	MILEAGE	VALUE	BALANCE OWED/ MONTHLY PAYMENT	OWED TO: Creditor Name
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

HOUSEHOLD ITEMS

Household goods, supplies and furnishings (Value at replacement cost considering age & condition)

DESCRIPTION	VALUE	BALANCE OWED	MONTHLY PAYMENT	NAME OF CREDITOR.
6. a. Living room furnishings	\$		\$	
b. Dining room furnishings	\$		\$	
c. Bedroom(s) furnishings	\$		\$	
d. Kitchen furnishings	\$		\$	
e. Kitchen appliances & utensils	\$		\$	
f. Washer & Dryer	\$		\$	
h. Household furnishings-specific items worth \$500 or more				
Item: _____	\$		\$	
Item: _____	\$		\$	
Item: _____	\$		\$	
7. Television & Stereo Equipment	\$		\$	

DESCRIPTION	VALUE	BALANCE OWED	MONTHLY PAYMENT	NAME OF CREDITOR.
Other Electronics such as phones & tablets List each with value	\$		\$	
8. Books, pictures, art objects; stamp, coin, and other collections Type of Collection:	\$		\$	
9. Sports Equipment (Be specific) Other Hobby Equipment (Be specific)	\$ \$			
10. Firearms (Make & Model) List each with value	\$			
11. Wearing apparel				
Personal Wardrobe - Debtor	\$		\$	
Personal Wardrobe - Joint Debtor	\$		\$	
Personal Wardrobe - Dependents	\$		\$	
12. Jewelry				
Wedding Rings	\$			
Other Jewelry	\$			
13. Non-Farm Animals				
14. Other items including Health aides				
FINANCIAL ASSETS				
16. Cash on hand	\$			
17. Deposits of money	Usual Balance	Name of Bank	Acct #	Other Names on Account
Savings Account	\$			
Checking Account	\$			
Other Account (specify type)	\$			
Other Account (specify type)	\$			
Other Account (specify type)	\$			

DESCRIPTION	VALUE	BALANCE OWED	MONTHLY PAYMENT	NAME OF CREDITOR.
18. Bond funds, Mutual Funds, Publicly Traded Stocks	\$			
19. Business Interest Non-publicly traded Stock, LLC, Partnership Joint Venture	\$			
20. Government and corporate bonds and other negotiable and non-negotiable instruments				
21. Retirement & Pension or profit-sharing plans, IRA, 401(k), 403(B)	\$ \$			
22. Security deposits				
Landlord Name:	\$			
Other:	\$			
23. Annuities	\$			
24. Interests in education IRA or a qualified State tuition plan.	\$			
25. Trusts, Equitable and future interests, Beneficial Rights or Powers	\$			
26. Patents, copyrights and other intellectual property	\$			
27. Licenses, franchises and other general intangibles	\$			
28. Tax Refunds				
29. Family support arrears to which you are or may be entitled)	\$			
30. Other Amounts Owed to Debtor				
31. Interests in insurance policies	\$			
32. Has anyone died and left you any money, property or life insurance?	\$			
33. Do you have claims against anyone for any other reason (personal injury, property damage, workers comp, etc.)	\$			
34 Other Contingent & Unliquidated Claims including Counterclaims & Set-Off Rights				
35. Other Financial Assets				

DESCRIPTION	VALUE	BALANCE OWED	MONTHLY PAYMENT	NAME OF CREDITOR.
BUSINESS RELATED				
38. Accounts Receivable and Earned Commissions				
39. Office equipment, furnishings and supplies - include computers (Please list with values)	\$			
40. Machinery, fixtures, equipment and supplies (Please list with values)	\$			
41. Inventory				
42. Partnerships or Joint Venture Interests				
43. Customer lists or other compilations containing personally identifiable information provided to you in connection with obtaining a product or service.				
44. Other Business Related Property				
FARM RELATED				
47. Farm Animals, Livestock, poultry and other animals	\$			
48. Crops, Growing or Harvested	\$			
49. Farming & Fishing equipment and implements	\$			
50. Farming & Fishing supplies, chemicals and feed	\$			
51. Other Farm & Commercial Fishing Property	\$			
OTHER PROPERTY				
53. Other property of any kind Not Already Listed				

DEBTS SECURED BY PROPERTY:

Secured debts are car loans, home loans, home equity loans, second mortgages, or any other loans where property is pledged as security. All other types of debt are unsecured.

Creditor's Name & Address	Balance Owed/ Monthly Payment	I Want to Keep/ Surrender Property	Account Number and Date of Loan	Is Anyone Else Liable? Name & Address
Principal Residence (Your Home)				
Name & address of First Mortgage	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Name & address Second Mortgage/ Home Equity Loan	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Vacation or Income Property				
Name & address of First Mortgage	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Name & address Second Mortgage/ Home Equity Loan	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Other Real Estate				
Name & address of First Mortgage	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Name & address Second Mortgage/ Home Equity Loan	\$ \$	Keep____ Surrender _____	Acct # _____ Date of Loan _____	
Automobile Loans (Company & address)				
	\$ \$	Keep____ Surrender__	Acct # _____ Date of Loan _____ Which Car? _____	
	\$ \$	Keep _____ Surrender__	Acct # _____ Date of Loan _____ Which Car? _____	

Creditor's Name & Address	Balance Owed/ Monthly Payment	I Want to Keep/ Surrender Property	Account Number and Date of Loan	Is Anyone Else Liable? Name & Address
Other Secured Debts				
	\$	Keep _____	Acct # _____ Date of Loan _____	
	\$	Surrender__	Collateral _____	
	\$	Keep _____	Acct # _____ Date of Loan _____	
	\$	Surrender__	Collateral _____	
	\$	Keep _____	Acct # _____ Date of Loan _____	
	\$	Surrender__	Collateral _____	
PRIORITY DEBTS				
FEDERAL TAXES	\$	Year	Type of Tax Business or Income	
STATE TAXES	\$	Year	Type of Tax Business or Income	
OTHER TAXES	\$	Year	Type of Tax _____	
STUDENT LOANS (Name & Address)	\$			
UNPAID TICKETS/FINES (Need list of citations and who is owed)	\$			
DOMESTIC SUPPORT ORDERS Name and Address and Phone Number of Recipient	Type- Maintenance/ Child Support	Monthly Payment	Total Arrearage Due	
		\$	\$	
		\$	\$	

UNSECURED DEBTS

Including - Medical Bills, Gas & Electric Bills, Cash Advances, Collection Agencies, Money Owed To Friends & Family, Attorney Fees and Any Other Money Owed To Anyone For Any Reason.
Use Additional Sheets if Necessary.

Creditor Name & Address	Balance Owed	Type of Debt Credit Card/ Medical Bill/ Loan	Account Number	Date of Last Charge, Loan/Cash Advance
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			

CO-DEBTORS/ CO-SIGNOR/ GUARANTOR

If anyone else is responsible for paying any of th above debts, please provide the following information

Name of Creditor	Name and address of Co-debtor

LEASES (Vehicles, Equipment, and Apartments)

Leasing Company Name & Address	Describe Items Leased	Length of Lease	# of Months Left	Do you intend to keep?	Monthly Payment
					\$
					\$

PERSONAL INFORMATION - PLEASE COMPLETE

	DEBTOR	SPOUSE/JOINT DEBTOR
MARITAL STATUS:		
AGE:		
OCCUPATION:		
LENGTH OF EMP.:		
EMPLOYER NAME:		
EMPLOYER ADDRESS:		

ADDITIONAL EMPLOYERS - SECOND JOB OR PART TIME JOB

DEBTOR OR JOINT DEBTOR	EMPLOYER NAME & ADDRESS	OCCUPATION	LENGTH OF EMPLOYMENT

MONTHLY INCOME

Pay Period: ___ Weekly ___ Every 2 Weeks ___ 2 Times/Month ___ 1 Time/Month	DEBTOR	SPOUSE
Current monthly gross wages, salary, commissions: (If paid weekly - wages times 4.3) (If every 2 weeks - wages times 2.15)	\$	\$
Estimated monthly overtime	\$	\$
Payroll taxes and Social Security deducted:	\$	\$
Insurance deducted	\$	\$
Union Dues Deducted	\$	\$
Uniform Fees/Cleaning Deducted	\$	\$
Retirement Contribution (401k, 403B, Pension)	\$	\$
Child Support Deducted	\$	\$
Other payroll Deductions	\$	\$
ANY OTHER INCOME		
Monthly Unemployment Compensation received:	\$	\$
Regular monthly income from business, profession, or farm: (Attach Last Year's Tax Return)	\$	\$
Monthly income from real property:	\$	\$
Monthly interest and dividends received:	\$	\$
Alimony, maintenance, or child support payments received every month:	\$	\$
Social Security, government assistance received or Food Share	\$	\$
Pension or Retirement Benefits Received	\$	
Other Monthly income - Specify	\$	\$
Describe any increase or decrease of more than 10% in any previous category anticipated to occur in the year following this filing:		

DEPENDENTS

NAME	AGE	RELATIONSHIP Son/Daughter, etc.	
			Born to: <input type="checkbox"/> Debtor <input type="checkbox"/> Joint Debtor <input type="checkbox"/> Both Does Dependent live with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
			Born to: <input type="checkbox"/> Debtor <input type="checkbox"/> Joint Debtor <input type="checkbox"/> Both Does Dependent live with you? <input type="checkbox"/> Yes <input type="checkbox"/> No
			Born to: <input type="checkbox"/> Debtor <input type="checkbox"/> Joint Debtor <input type="checkbox"/> Both Does Dependent live with you? <input type="checkbox"/> Yes <input type="checkbox"/> No

MONTHLY EXPENSES

USE MONTHLY AVERAGE FOR ALL EXPENSES.	EXPENSES
Rent or home first mortgage payment:	\$
Does this include real estate taxes? <input type="checkbox"/> YES <input type="checkbox"/> NO - If not included, list amount	\$
Does this include property insurance? <input type="checkbox"/> YES <input type="checkbox"/> NO - If not included, list amount	\$
Home maintenance (average monthly repairs and upkeep):	\$
HOA fees or Condo Dues:	\$
Add'l mortgage payments for home such as second mortgage or home equity:	\$
Add'l mortgage payments for home such as third mortgage or home equity:	\$
Electricity and heating fuel (average monthly):	\$
Water, sewer, garbage collection (average monthly):	\$
Telephone, cell phone, internet, satellite, cable (average monthly):	\$
Other utilities (average monthly):	\$
Food and housekeeping supplies (average monthly):	\$

Child care and children's education costs (average monthly):	\$
Clothing purchases, Laundry and Dry Cleaning (average monthly):	\$
Personal care products and services: (average monthly):	\$
Uninsured Medical and dental expenses (average monthly):	\$
Transportation - Gas, maintenance, bus, train fare (not including car payments):	\$
Recreation, clubs, entertainment, newspapers, magazines, books(monthly):	\$
Charitable contributions, Church donations (average monthly):	\$
Life insurance premiums (Not deducted from wages):	\$
Health insurance premiums (Not deducted from wages):	\$
Auto insurance premiums:	\$
Other insurance premiums: Specify:	\$
Taxes not deducted from wages or included in home mortgage payments: Specify:	\$
Installment auto or lease payments: Which Vehicle:	\$
Second installment auto or lease payments: Which Vehicle:	\$
Other installment auto or lease payments: Which Vehicle:	\$
Other installment payments such as boat, camper, ATV, etc: Which Vehicle:	\$

Alimony, maintenance, and child support paid to others (Not deducted from wages):	\$
Payments for dependents not living at your home:	\$
Operation expenses of business, profession, or farm:	\$
Pet Supplies/Vet Bills: Please list what kind of pets and how many	\$
Mortgages on other property:	\$
Real estate taxes on other property:	\$
Property homeowners or rental insurance on other property:	\$
Maintenance, repair, upkeep on other property:	\$
HOA fees or Condo Dues on other property:	\$
Other Court Ordered Payments:	\$
Health Savings Accounts	\$
Care for Elderly, Chronically Ill or Disabled Family Members	\$
Protection from Family Violence	\$
Other regular monthly expenses: (Be specific)	\$
	\$
	\$
	\$

STATEMENT OF FINANCIAL AFFAIRS

1. Current Marital Status: Married _____ ; Divorced _____ ; Widowed _____ .
2. If you have moved within the last THREE years, list all premises occupied and vacated during that period.

Address	Name used	Dates of occupancy

3. In Last 8 years, have you lived in a community property state? YES_____ ; NO_____ (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington or Wisconsin)

Did your Spouse or former spouse live with you? YES_____ ; NO_____

4. Income from employment or operation of business.

Year	Employer name and address	Employer name and address	Gross Income
			\$
			\$

5. Income NOT from employment or operation of business. (Social Security, Unemployment, Etc.)

Year	Source of Income	Source of Income	Amount Received
			\$
			\$

6. If you paid any one creditor a total of more than \$600 in the last 90 days, list those payments.

Creditor Name & Address	Dates of Payments	Amount paid	Amount Still Owed

7. List payments made to Friends, Family Members, Business Partners or Associates during the last year.

Person Paid Name & Address Relationship to you?	Dates of Payments	Amount paid	Amount Still Owed

8. List payments made on debts you co-signed or guaranteed during the last year.

Other Person on Loan	Payment Dates	Amount Paid	Amount Still Owing	Reason for Payment
		\$	\$	
		\$	\$	

9. Were you sued or did you sue anybody in the last 12 months? ____YES ____NO

Caption of Suit	Case Number	Nature of Proceeding	Court & Location	Status/Disposition

10. List any property repossessed, foreclosed, garnished, attached, seized or levied during the last year by a creditor.

Creditor Name & Address	Date of Seizure	Description and Value of Property

11. List all amounts which any creditor set off against any of your accounts with the creditor, including banks,

Creditor Name & Address	Date of Setoff	Amount of Setoff

12. Has any of your property been in the hands of a custodian, receiver, or court-appointed official during the past year?

Custodian Name & Address	Court Location	Case Title & Number	Date of Order	List Property and Value
				\$
				\$

13. List all gifts made during the last two years with a total value of more than \$600 per person.

Recipient Name & Address	Relationship if any	Date of Gift	Description and value of Gift

14. List all charitable contributions made during the last two years with a total value of more than \$600 to any charity.

Recipient Name & Address	Relationship if any	Date of Gift	Description and value of Gift

15. List all losses from fire, theft, other casualty or gambling during the past year.

Circumstances of Loss	Insurance if any	Date of Loss	Description and value of Property

16. List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy during the past year.

Payee Name & Address	Date of Payment	Amount Paid
Brunner Law Office, LLC 233 N. Main Street West Bend 53095		
Credit Counseling		

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? (Debt Consolidators, Debt Eliminators, Etc.)

Payee Name & Address	Type of Business	Amount Paid	Date Paid
		\$	
		\$	

18. List all other property, given away or sold for less than fair market value, either absolutely or as security during the past two years to creditor or family member.

Transferee Name & Address	Relationship	Date of Transfer	Description and Value of Property

19. List all other property transferred within 10 years to a self-settled trust or similar device of which you are a beneficiary.

Name of Trust or Other Device	Date of Transfer	Description and Value of Property

20. List all financial accounts and instruments held by or for the benefit of the debtor which were closed, sold or otherwise transferred in the past year. Include checking, savings, or other financial accounts, CDs, shares and share accounts held in banks, credit unions, pension funds, brokerage houses, etc.

Institution Name & Address	Account Type & Number Amount of Final Balance	Date of Sale or Closing

21. List each safe deposit or other box or depository in which you have had valuables within the past year.

Institution Name & Address	Who has access?	Description of Contents

22. List each storage unit or other place where you stored property within the past year.

Storage Facility Name & Address	Who has access?	Description of Contents

23. List all property OWNED by another person that the debtor (you or you and your spouse) holds or controls. (Borrowed, Stored, Held in Trust)

Owner Name & Address	Location of Property	Description and Value of Property

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

24. List the name and address of every site for which you 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:

Site Name and Address	Name and Address Governmental Unit	Date of Notice	Environmental Law

25. List the name and address of every site for which you 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 Governmental Unit	Date of Notice	Environmental Law

26. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which you are or were 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 Governmental Unit	Docket Number	Status or Disposition

27. Nature, location and name of business

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 **four 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 four 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.

Business Name & Address	Taxpayer ID Number or Last Four Digits of Social Security Number	Accountant Name	Nature of Business	Beginning and End Dates of Operation

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

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Name and Address	Date Issued