



Henry & Henry

Since 1996

Auto Accidents • Bankruptcy • Family Law

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BANKRUPTCY WORKSHEET

(101) NAME, CONTACT INFO, AND ADDRESS

A. Give full legal names:

Debtor 1: _____ SSN: _____ AGE: _____

Debtor 2: _____ SSN: _____ AGE: _____

Are you currently married? _____

Have you used any other names in the past, including maiden names? No__ Yes__ If yes, please list other names used: _____

B. Current residence address: _____

_____ For how long: _____

Own or rent: _____

Any Different Mailing Address: _____

C. Prior residences for the previous 3 years, including dates occupied:

Address: _____ Dates: _____
mm/dd/yy-mm/dd/yy

Address: _____ Dates: _____
mm/dd/yy-mm/dd/yy

D. Have you filed for Bankruptcy previously? No__ Yes__ Location where filed _____

_____, Date filed _____.

Case number _____ Discharge received yes__ or no__.

E. Have you owned a business or been a business partner in a sole proprietorship (self-employed), LLC, or corporation in the 4 years before filing for bankruptcy?

No__ Yes__ Explain _____

(A/B) PROPERTY

A. REAL PROPERTY:

Homestead Address: _____

Description: _____

(i.e. 3 bedroom/3 bath, Mobile home on 2 acres, etc.)

Purchase Price & Date: _____

Fair Market Value: _____

Surrender / Reaffirm? (circle one)

First Mortgage Company: _____

Address: _____

Balance on Mortgage: _____

Acct. No.: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

If Chapter 13: Exact payment amount: _____

Exact arrearage amount: _____

Second Mortgage Company: _____

Address: _____

Balance on Mortgage: _____

Acct. No.: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

If Chapter 13: Exact payment amount: _____

Exact arrearage amount: _____

B. OTHER REAL PROPERTY: (include raw land if financed or deeded separately from home)

Description: _____

(i.e., 3 bedroom/3 bath, Mobile home on 2 acres, etc.)

Purchase Price & Date: _____

Fair Market Value: _____

Surrender / Reaffirm? (circle one)

First Mortgage Company: _____

Address: _____

Balance on Mortgage: _____

Acct. No.: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

If Chapter 13: Exact payment amount: _____

Exact arrearage amount: _____

Surrender / Reaffirm? (circle one)

Second Mortgage Company: _____

Address: _____

Balance on Mortgage: _____

Acct. No.: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

If Chapter 13: Exact payment amount: _____

Exact arrearage amount: _____

Surrender / Reaffirm? (circle one)

C. VEHICLES:

1. Owned or Financed (circle) Please list additional vehicles on separate paper if applicable.

Description: _____

(ex. 2010 Dodge Caravan Sport, paint damage, interior soiled)

VIN #: _____

Value: _____ Mileage: _____

Financing Company: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

Retain? (yes/no)

2. Owned or Financed (circle) Please list additional vehicles on separate paper if applicable.

Description: _____

(ex. 2010 Dodge Caravan Sport, paint damage, interior soiled)

VIN #: _____

Value: _____ Mileage: _____

Financing Company: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

Retain? (yes/no)

D. WATERCRAFT/AIRCRAFT/MOTOR HOMES/ATVs/OTHER:

1. Owned or Financed (circle)

Description: _____

(ex. 2010 Dodge Caravan Sport, paint damage, interior soiled)

VIN #: _____

Value: _____

Mileage: _____ Financing

Company: _____

Account belongs to (circle): Debtor 1 Debtor 2 Joint

E. FINANCIAL ACCOUNTS: Please list **ALL** open bank accounts below. If not enough space for all accounts, please provide additional information on a separate sheet of paper:

Cash on hand (average amount per day): \$ _____

What Bank? _____ Joint? _____ Savings \$ _____ last four _____

What Bank? _____ Joint? _____ Checking \$ _____ last four _____

What Bank? _____ Joint? _____ Savings \$ _____ last four _____

What Bank? _____ Joint? _____ Checking \$ _____ last four _____

Crypto/Online/Virtual Account(s): _____ \$ _____ last four _____

Certificates of Deposits (CD[s]): _____

What Bank? _____ \$ _____

Security deposits with public utilities, telephone companies, landlords, and others. Please explain:

We recommend: (Fair Market/Garage sale value)
ALL personal property (Secured and Unsecured):
 Give a description and \$ amount (Garage Sale Value). Use a separate sheet if necessary. Please group all LIKE items and put all items on this sheet. (ex. Small kitchen appliances, dishware, master bedroom set).

TV \$75.00

[illegible]

Bonds, mutual funds, or publicly traded stocks. (Examples: Bond funds, investment accounts with brokerage firms, money market accounts) No__Yes__ Institution or issuer name:_____
Value \$_____.

Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No__Yes__ Give specific information:
Name of entity:_____
% of ownership:_____ Value \$_____.

Government and corporate bonds and other negotiable and non-negotiable instruments. No__Yes__
Give specific information about the Issuer name: _____
\$_____.

Retirement or pension accounts (Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans) No__Yes__ List each account separately:
Type of account:_____ Institution name:_____ \$_____
Type of account:_____ Institution name:_____ \$_____.

Annuities No__Yes__ Issuer name and description _____
\$_____.

Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. No__Yes__ Issuer name and description _____
\$_____.

Trusts, equitable or future interests in property, and rights or powers exercisable for your benefit
No__Yes__. Give specific information _____
\$_____.

Patents, copyrights, trademarks, trade secrets, and other intellectual property (Examples: Internet domain names, websites, proceeds from royalties and licensing agreements) No__Yes__ Give specific information: _____
\$_____.

Licenses, franchises, and other general intangibles (Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses) No__Yes__ Give specific information: _____
\$_____.

Does anyone owe you money or property? No__Yes__ Value \$_____
Who and Why?_____.

Tax refunds owed to you? No__Yes__ Give specific information including whether you already filed the returns and the tax years: _____
\$_____.

Family support owed to you (Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement) No___Yes___ Give specific information, who, what, and why_____

_____ \$_____.

Other amounts someone owes you (Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else) No___Yes___ Give specific information, Who, what, and why_____

_____ \$_____.

Interests in life insurance policies No___Yes___ Name the insurance company of each policy and list its value. Company name:_____

Beneficiary:_____ Surrender or refund value: \$_____.

Any interest in property that is due you from someone who has died. If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No___Yes___ Give specific information_____

_____ \$_____.

Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No___Yes___ Describe each claim_____

_____ \$_____.

Any financial assets you did not already list No___Yes___ Give specific information_____

_____ \$_____.

(D) SECURED DEBTS: (secured loans with collateral, i.e., home/furniture/vehicles) Additional creditors only:

Please do not add any creditors already listed on your credit report.

Creditor name and address:_____

Account No.:_____ Balance owed:_____

Month and year the account was opened:_____

Description of collateral:_____

Value of Collateral:_____

Retain / Reaffirm / Surrender the collateral?_____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint

Codebtor? Name/Information_____

If Chapter 13: Exact payment amount: _____ Exact arrearage amount: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Description of collateral: _____

Value of Collateral: _____

Retain / Reaffirm / Surrender the collateral? _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint

Codebtor? Name/Information _____

If Chapter 13: Exact payment amount: _____ Exact arrearage amount: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Description of collateral: _____

Value of Collateral: _____

Retain / Reaffirm / Surrender the collateral? _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint

Codebtor? Name/Information _____

If Chapter 13: Exact payment amount: _____ Exact arrearage amount: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Description of collateral: _____

Value of Collateral: _____

Retain / Reaffirm / Surrender the collateral? _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint

Codebtor? Name/Information _____

If Chapter 13: Exact payment amount: _____ Exact arrearage amount: _____

(E/F) UNSECURED DEBTS: (medical, credit, signature loans) Additional creditors **not** already listed on your credit report.

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

Creditor name and address: _____

Account No.: _____ Balance owed: _____

Month and year the account was opened: _____

Account belongs to (circle one): Debtor 1 Debtor 2 Joint Other: _____

(G) EXECUTORY CONTRACTS AND UNEXPIRED LEASES:

- A.** Do you have any executory contracts or unexpired leases? No___ Yes___ If Yes, fill in all of the information below. List each person or company with whom you have the contract or lease separately. Then state what each contract or lease is for (ex: home lease, vehicle lease, cell phone).

Company Name: _____
Address: _____
Property: _____

Company Name: _____
Address: _____
Property: _____

(H) CODEBTORS:

- A.** Do you have any codebtors? (If you are filing a joint case, do not list your spouse as a codebtor.)
No ___ Yes ___

1. _____
Creditor/Loan Codebtor Name Address

(I) INCOME:

A. YOUR PRESENT EMPLOYER:

Debtor 1:

Employer: _____ Unemployed? _____
Address: _____
Occupation: _____ How long: _____

Debtor 2:

Employer: _____ Unemployed? _____
Address: _____
Occupation: _____ How long: _____

- B.** What are your average **gross** wages, salary, and/or commissions per pay period? (Please state whether these are weekly, bi-weekly, monthly, quarterly, etc...)

Debtor 1: \$ _____ per _____ (weekly, bi-weekly, etc...)

Debtor 2: \$ _____ per _____ (weekly, bi-weekly, etc...)

- C.** Other sources of Income, including retirement, social security, unemployment, and rent:
\$ _____

- D.** Do either of you anticipate any changes in income or expenses? If yes, explain: _____

MEANS TEST WORKSHEET

PLEASE DO NOT RECREATE THIS FORM ON YOUR COMPUTER. OUR
FORM GOES DIRECTLY WITH OUR PROGRAM - THANK YOU!!!

Directions - Please list each pay stub individually for the last six (6) months. If you have worked more than one (1) job, please list your first job with all six (6) months' information and then list your second job with the six months' pay information. One (1) copy of these checks must be provided with this worksheet.

DEBTOR 1:

EMPLOYER OR OTHER SOURCE OF INCOME EX: SOCIAL SECURITY, UNEMPLOYMENT	CHECK DATE	GROSS (BEFORE TAXES)	FEDERAL WITHHOLDING TAX	SS, FICA, OR OASDI	MEDICARE	OTHER DEDUCTIONS: Add all of your other deduct- ions and put one (1) figure in this block

DEBTOR 2:

EMPLOYER OR OTHER SOURCE OF INCOME EX: SOCIAL SECURITY, UNEMPLOYMENT	CHECK DATE	GROSS (BEFORE TAXES)	FEDERAL WITHHOLDING TAX	SS, FICA, OR OASDI	MEDICARE	OTHER DEDUCTIONS: Add all of your other deduct- ions and put one (1) figure in this block

E. Do either of you **receive** alimony, maintenance, or support? ____ No ____ Yes Explain _____
\$_____.

F. Do either of you **pay** alimony, maintenance, or support? ____ No ____ Yes Explain _____
\$_____.

(J) EXPENSES:

A. DEPENDENTS: (anyone you support by paying over 50% of their living expenses)

Name	Age	Relationship
Name	Age	Relationship
Name	Age	Relationship
Name	Age	Relationship

B. Do your expenses include expenses of people other than yourself and your dependents?

No _____ Yes _____ Explain _____

C. MONTHLY EXPENSES:

Home:

Rent on residence (include lot rented for mobile home) _____

Mortgage on residence _____

Additional mortgage payments for residence, ex: equity loans, 2nd mortgage. _____

Real estate taxes (if not included in mortgage) _____

Property, homeowners, or renter's insurance (if not included in mortgage) _____

Home maintenance, repair, and upkeep expenses _____

Homeowner association or condominium dues _____

Utilities:

Electricity, natural gas, propane _____

Water, sewer, garbage collection _____

Telephone, cell phone, Internet, satellite, and cable _____

Other Utilities _____

Food and Housekeeping supplies _____

Childcare and children's education costs _____

Clothing, laundry, and dry cleaning _____

Personal care products and services _____

Medical and dental expenses _____

(uncovered expenses/co-pays, over-the-counter medicine) _____

Transportation (including gas, maintenance, bus, train, but not payments) _____

Entertainment, clubs, recreation _____

Newspapers, magazines, and books _____

Charitable contributions and religious donations _____

Insurance (not deducted from wages or included in mortgage payments)

Life Insurance _____

Health Insurance _____

Vehicle Insurance _____

Other Insurance _____

Taxes (not deducted from wages, or included in mortgage payments)	_____
Other Taxes _____	_____
Installment and lease payments	
Car payments for Vehicle Debtor 1	_____
Car payments for Vehicle Debtor 2	_____
Other Installment Payments	_____
Payments of Alimony, Maintenance, and Support (not deducted from your pay)	_____
Other Payments you make to support others who do not live with you	_____
Other Support _____	_____
Other real property expenses (Second Property, Not Homestead)	
Mortgage	_____
Real estate taxes	_____
Property, homeowner's, or renter's insurance	_____
Maintenance, repair, and upkeep expenses	_____
Homeowner's association or condominium dues	_____
Other _____	_____
All Other Expenses (pets, security, pool, Solar panels, etc.)	_____
Specify _____	

(FORM 107) OTHER INFORMATION:

1. **SOFA 4:** Income from employment or business for the last two years and year to date:

	(YTD)	(2025)	(2024)
Debtor 1: \$	_____	\$ _____	\$ _____
Debtor 2: \$	_____	\$ _____	\$ _____

2. **SOFA 5:** Income **other** than from employment or business for the last two years and year to date:
(ex, Retirement, Social security, Winnings, etc.)

	(YTD)	(2025)	(2024)
Debtor 1: \$	_____	\$ _____	\$ _____
Debtor 2: \$	_____	\$ _____	\$ _____

3. **SOFA 6:** List each creditor whom you paid at least \$600 during the 90 days before you filed for bankruptcy and include the total amount you paid that creditor.
(Do not include mortgage or car payments)

Name/Address of Creditor: _____

Dates of Payments: _____

Amount Paid: \$ _____ Amount Owed: \$ _____

Name/Address of Creditor: _____

Dates of Payments: _____

Amount Paid: \$ _____ Amount Owed: \$ _____

4. **SOFA 7:** Within 1 year before you filed for bankruptcy, did you pay back a debt you owed to a family member or friend? No ____ Yes ____ Details: _____
\$ _____

5. **SOFA 8:** Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt for someone else? No ____ Yes ____ Details: _____

6. **SOFA 9:** Within 1 year before you filed for bankruptcy, were you a party in any lawsuits, court action, or Administrative proceeding? Include Caption of Suit, Case No., Nature of Proceeding, Court (Circuit/Civil), Location, Status or Disposition: _____

7. **SOFA 10:** Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, or transferred back to the seller? No ____ If yes, please explain below:
Name and address of creditor or seller: _____

Date of Repossession, Description and Property Value: _____

8. **SOFA 11:** Creditor Setoff, or Refusal to Make Payment: Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Name/Address of Creditor: _____ Date: _____
Amount Setoff: \$ _____ Amount Owed: \$ _____

9. **SOFA 12:** Assignment of Property for the Benefit of Creditors: Within one year before filing for bankruptcy, was any of your property in possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ____ Yes ____ Explain: _____

10. **SOFA 13: Gifts:** Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ____ Yes ____ Name and address of person: _____
Relationship to debtor if any: _____
Date of gift and description and value: _____
11. **SOFA 14: Charitable Contributions:** Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charitable organization? No ____ Yes ____ Name and address of person or organization: _____
Relationship to debtor if any: _____
Date of gift and description and value: _____
12. **SOFA 15: Losses from Theft, Fire, Other Disaster, or Gambling:** Within 1 year before you filed for Bankruptcy did you lose anything because of theft, fire, other disaster, or gambling? No ____ Yes ____
Description and value of property: _____
Description of circumstances, if the loss was covered in whole or in part by insurance and date of loss: _____
13. **SOFA 16: Payments Related to Bankruptcy:** Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf, pay or transfer any property to anyone you consulted about Seeking bankruptcy or preparing a bankruptcy petition, other than Henry & Henry? No ____ Yes ____ Details _____
14. **SOFA 17: Payments made to debt counseling:** Within 1 year before you filed for bankruptcy, did you make a payment to debt counseling for debt consolidation or preparation of a petition in Bankruptcy? No ____ Yes ____ Name and address of payee: _____
Date of payment: _____
Name of Payor (if other than debtor): _____
Amount, description and value of property: _____
15. **SOFA 18:** Did you sell, trade, or otherwise transfer anything of value within 2 years before you filed for bankruptcy, to anyone, other than property transferred in the ordinary course of your business or financial affairs? No ____ Yes ____ Date: _____
Name of Recipient: _____
Amount, description and value of property: _____
16. **SOFA 19: Self-Settled Trusts:** Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? No ____ Yes ____ Trust Account # and Institution: _____
Date of transfer: _____ Amount, description and value of property: _____

17. **SOFA 20: Closed Financial Accounts:** Within 1 year before you filed for bankruptcy, were any financial accounts or instruments closed, sold, moved, or transferred? No___ Yes___ Name and address of institution: _____
Type, number of accounts, and amount of final balance: _____
Amount, date of sale and closing: _____
18. **SOFA 21: Safe Deposit Boxes:** Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No___ Yes___ Name and address of bank or other depository: _____
Name and address of those with access to the safe deposit box: _____
Description of contents: _____
Date of transfer or surrender, if any: _____
19. **SOFA 22: Property Stored in a Place Other Than Your Home:** Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No___ Yes___ Description and value of property: _____
Location of property: _____
20. **SOFA 23: Property Held for Another Person:** Include any property you borrowed from, are storing for, or hold in trust for someone else, including items of value in your home that belong to your children. No___ Yes___ Name and address of owner: _____
Description and value of property: _____

Name and address of owner: _____
Description and value of property: _____
21. **SOFA 27: Ownership or Connections to a Business (4 years)** Value and description of current Inventory (List ALL business inventory and fair market value) _____

22. **SOFA 28: Parties to Whom Financial Statement was Given:** Within 2 years before you filed for Bankruptcy, did you give a financial statement to anyone about your business? No___
Yes___ Name and Address _____
Date given _____
23. Do you owe any back taxes? No___ Yes___ Explain _____

Amount owed _____
24. Did you buy anything of value (\$1,000 or more) within 6 months of filing? No___ Yes___ How was it paid for? Explain: _____

*** PRIOR TO FILING YOUR BANKRUPTCY DOCUMENTS WITH THE COURT, PLEASE PROVIDE ONE (1) COPY OF ALL DOCUMENTS REQUESTED AT THE TIME OF TURNING IN YOUR WORKSHEET, SEE ATTACHED SHEET

*** ATTENTION CHAPTER 7 CLIENT(S): DID YOU IDENTIFY THE PROPERTY (CASH AND/OR FURNISHINGS) THAT YOU WISH TO EXEMPT (\$1,000.00 FOR INDIVIDUALS AND \$2,000.00 FOR JOINT PETITIONERS)?

*** PLEASE BE REMINDED YOU MUST PROVIDE ALL INFORMATION REQUESTED IN THE WORKSHEET. IN ORDER FOR YOUR DEBT TO BE DISCHARGED, YOU MUST PROPERLY LIST THE CREDITOR INFORMATION. (ex. correct address, acct. no., year opened, amount of debt)

THE INFORMATION FURNISHED IN THE BANKRUPTCY WORKSHEET IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE. SHOULD I HAVE ANY ADDITIONAL CHANGES TO THIS INFORMATION, I WILL SUBMIT SAME IN WRITING TO HENRY AND HENRY LAW

I HEREBY ACKNOWLEDGE THAT A CREDIT REPORT WILL BE REQUESTED BY HENRY AND HENRY LAW AND USED AS ADDITIONAL VERIFICATION OF DEBTS.

Client/Debtor

Date

Client/Debtor

Date