
LAW OFFICES OF TY CARSS
BANKRUPTCY
QUESTIONNAIRE

READ THIS PRIOR TO TURNING IN YOUR COMPLETED QUESTIONNAIRE

You, as the client, are responsible for the accuracy of the information contained in your answers and in the attachments, if any, to this questionnaire. You must disclose all your assets, all your debts, and make accurate statements of your income and expenses. You must also accurately answer all the questions regarding your financial affairs. If you provide false or incorrect or incomplete information on this questionnaire, your bankruptcy schedules will not be correct. If your bankruptcy schedules are not correct, the relief you are requesting from the Bankruptcy Court may be denied, and you could be charged with a federal crime. Please review your answers once again before turning in your questionnaire and make sure that your answers are accurate and complete.

CERTIFICATION BY CLIENT

I have read the statement above, and hereby certify to the best of my knowledge that all the information contained in the answers to this questionnaire, and any attachments thereto, is accurate and complete.

Client (Debtor)

Client (Joint Debtor)

Client Questionnaire for Non-Business Debtor

Section 1 – Basic Information

PART A - PERSONAL INFORMATION (Debtor)

First name: _____ Middle name: _____ Last name: _____

Cell number: (____) _____ Work phone number: (____) _____

Email Address: _____

List any other names you have used within the last 8 years: _____

Social Security No.: _____ -- _____ -- _____ Date of Birth: _____

Current Street Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Date you first resided at this address? _____

Current Mailing address (if different from Street Address)

Mailing Address: _____

City: _____ State: _____ ZIP: _____ County: _____

List all addresses at which you have resided in the last 3 years, and list the dates you resided at each one.

Address: _____ Date: _____ – _____

City: _____ State: _____ ZIP: _____ County: _____

Address: _____ Date: _____ – _____

City: _____ State: _____ ZIP: _____ County: _____

PART B - PERSONAL INFORMATION OF JOINT-DEBTOR (usually a Spouse)

If you are filing jointly with your spouse (Joint-Debtor), fill in the following information about them:

First name: _____ Middle name: _____ Last name: _____

Cell number: (____) _____ Work phone number: (____) _____

Email Address: _____

List any other names you have used within the last 8 years: _____

Social Security No.: _____ -- _____ -- _____ Date of Birth: _____

Current Street Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Date you first resided at this address? _____

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Current Mailing address (if different from Street Address)

Mailing Address: _____

City: _____ State: _____ ZIP: _____ County: _____

List all addresses at which you have resided in the last 3 years, and list the dates you resided at each one.

Address: _____ Date: _____ – _____

City: _____ State: _____ ZIP: _____ County: _____

Address: _____ Date: _____ – _____

City: _____ State: _____ ZIP: _____ County: _____

PART C – PRIOR / PENDING BANKRUPTCY CASES

List any previous bankruptcy petitions filed in the last 8 years (type of case; date and place of filing):

Are there any bankruptcy cases pending against you, your business, your spouse, or spouse's business? No / Yes

If yes, name of debtor: _____ Relationship to you: _____

Case #: _____ Date Filed: _____ Judge: _____

Exhibit "C" to the Voluntary Petition

Do you own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? No / Yes

(If yes, please attach a list and description of the property)

Debtors who Reside as Tenants or Residential Property

If you rent your home, does a landlord hold judgment against you? No / Yes

If yes, please provide the name and address of the landlord:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Section 2 – Property

PART A - REAL ESTATE (Schedule A)

For each parcel of real estate (bare land, home, commercial property) that you own or are purchasing, complete each of the following questions. If you own or are purchasing more than one parcel of property, please copy this page before you fill in your answers and complete a separate page for each parcel.

Address and Description of Property	Date of Purchase	Original Purchase Price	Current market value*

* What could property be sold for today (obtain current market analysis from a real estate agent).

Name and complete mailing address of 1st Mortgage holder (bank or other lender who you make payments to)

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Current principal balance (amount still owed) on this loan: _____

Are payments current? Yes / No If No, how far behind? _____

Monthly payment amount: \$ _____ When was this loan taken out? _____

Does monthly payment include **Property Taxes** and **Insurance**? Yes / No

Name and complete mailing address of 2nd Mortgage holder (bank or other lender who you make payments to)

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Current principal balance (amount still owed) on this loan: _____

Are payments current? Yes / No If No, how far behind? _____

Monthly payment amount: \$ _____ When was this loan taken out? _____

Does monthly payment include **Property Taxes** and **Insurance**? Yes / No

PART B - PERSONAL PROPERTY (Schedule B)

If you own (or are buying) any of the kinds of assets described below, give your best estimate of the **current value** of each item. "**Current value**" means what an item would sell for at a garage sale; it does **not** mean the price you paid or replacement cost. For cash and bank accounts, indicate the amount that you estimate you will have on hand or in the bank as of the date your bankruptcy petition will be filed with the court.

- 1. Cash on hand \$ _____
- 2. Checking/Savings accounts
 - Name of Bank: _____ Account Bal: \$ _____
 - Type of Account: _____ Account #: _____
 - Name of Bank: _____ Account Bal: \$ _____
 - Type of Account: _____ Account #: _____
 - Name of Bank: _____ Account Bal: \$ _____
 - Type of Account: _____ Account #: _____
- 3. Savings, Certificates of Deposit (CDs) \$ _____
- 4. Deposits held by Landlord or Utility Companies (*i.e., SDG&E*) \$ _____
- 5. Household goods and furnishings, including audio, video, and computer equipment \$ _____
- 6. Books, pictures, art objects, antiques, stamp, coin, record, tape, compact disc,
and other collections or collectibles ** For Items 5, 6, 7 & 9, base the value as if
you were having a "Yard Sale" – need cash
quickly* \$ _____
- 7. Wearing apparel ** For item 8, use "Pawn Shop" type values* \$ _____
- 8. Furs and Jewelry ** For item 8, use "Pawn Shop" type values* \$ _____
- 9. Firearms, sports, photographic, and other hobby equipment \$ _____
- 10. Life insurance policies. *(List only the cash surrender value, if any; not the amount of insurance you have purchased)* \$ _____
- 11. Annuities. Itemize and name each issuer \$ _____
- 12. Education IRAs \$ _____
- 13. IRAs, ERISA-401(k), Keogh, or other pension or profit sharing plans. Itemize \$ _____
- 14. Stock and interests in incorporated and unincorporated businesses. Itemize \$ _____
- 15. Interests in partnerships or joint ventures \$ _____
- 16. Government and corporate bonds and other negotiable and non-negotiable instruments \$ _____
- 17. Accounts receivable/monies owed to you \$ _____
- 18. Alimony, maintenance, support, and property settlements to which you are or may be entitled \$ _____
- 19. Tax refunds owed to you *(Either waiting for or next year's anticipated refund)* \$ _____
- 20. Equitable or future interests, life estates, and rights or powers exercisable for your benefit \$ _____
- 21. Contingent and non-contingent interests in an estate of a decedent, death benefit plan,
life insurance policy, or trust \$ _____
- 22. Other contingent and unliquidated claims of every nature, including tax refunds,

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counterclaims of the debtor, and rights to setoff claims. Give estimated value of each \$ _____

(includes any claims you may have from auto accidents, whether a lawsuit has been filed or not, as well as any claims you have against anyone for any reason.)

23. Patents, copyrights, and other intellectual property \$ _____

24. Licenses, franchises, and other general intangibles \$ _____

25. Customer lists or personal information obtained by you in connection with providing a product or service to others \$ _____

26. **Automobiles, trucks, trailers, motorcycles and other vehicles**, including mobile homes or manufactured homes. (Include vehicles that you own outright; those you are purchasing; and those you are leasing, **and those that you are borrowing**. You must include all vehicles, even those you intend to keep and even if you are current on your payments.)

VEHICLE #1

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

VEHICLE #2

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

VEHICLE #3

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

VEHICLE #4

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

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VEHICLE #5

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

VEHICLE #6

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

27. Boats, motors, and accessories

Year / Make / Model / Trim: _____ Mileage: _____

Monthly Payment: \$ _____ Purchase Date: _____ Purchase Price: \$ _____

Name of lien holder (finance company): _____ Condition: Poor / Fair / Good

Address of Finance Company: _____

Do you want to: KEEP (or) SURRENDER this vehicle? (check one)

28. Aircraft and accessories \$ _____

29. Office equipment, furnishings, and supplies \$ _____

30. Machinery, fixtures, equipment and supplies used in business (attach itemized list) \$ _____

31. Inventory \$ _____

32. Animals \$ _____

33. Crops - growing or harvested \$ _____

34. Farming equipment and implements \$ _____

35. Farm supplies, chemicals and feed \$ _____

36. Other personal property not already listed \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Section 3 – Debts

Attach or enclose a copy of the most recent billing statement for each debt you owe, including any auto loans and home mortgages. You only need to fill in the space below if you have not provided a billing statement for one or more debts. If you have attached statements for each debt, skip to the next section and leave this section blank.

Typically this section is supplanted with a Personal Credit Report

Debt #1

Creditor Name: _____ Type of Account: _____
Address: _____
City: _____ State: _____ ZIP: _____
Account #: _____ Amount Owed: \$ _____ Date Incurred: _____
What is Debt for?: _____
Date Account Opened: _____ Date of Last use: _____

Debt #2

Creditor Name: _____ Type of Account: _____
Address: _____
City: _____ State: _____ ZIP: _____
Account #: _____ Amount Owed: \$ _____ Date Incurred: _____
What is Debt for?: _____
Date Account Opened: _____ Date of Last use: _____

Debt #3

Creditor Name: _____ Type of Account: _____
Address: _____
City: _____ State: _____ ZIP: _____
Account #: _____ Amount Owed: \$ _____ Date Incurred: _____
What is Debt for?: _____
Date Account Opened: _____ Date of Last use: _____

(Attach a separate sheet if you have more than three creditors for which you don't have statements.)

Section 4(a) – Unexpired Leases and Contracts (Schedule G)

List below and leases or contracts that are still current that you are a party to. Include residential, car, and business leases, and service or business contracts (Not residential leases)

Nature and Description of Contract	Name and Address of Other Party or Parties	Date that Contract Expires

Section 4(b) – Co-Signed Debts

List below any co-debtors on any of your debts.

Co-debtor #1

Co-debtor Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Creditor Name: _____

Type of Account: _____ Account #: _____

Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Co-debtor #2

Co-debtor Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Creditor Name: _____

Type of Account: _____ Account #: _____

Address: _____

City: _____ State: _____ ZIP: _____ County: _____

Section 5 – Current Income

Marital Status: Married Single Divorced Separated Widowed

DEPENDENTS

Names and ages of any dependents that you support (don't list spouse):

Name: _____ Age _____ Relation _____
 Name: _____ Age _____ Relation _____
 Name: _____ Age _____ Relation _____
 Name: _____ Age _____ Relation _____

Your occupation (**Job Title**):

Employer's name:

Employer's full mailing address:

Time length employed here?

Attach paystubs or other proof of income for the **past 6 months**.

If you receive income from any other sources, list the sources and the monthly amounts you receive:

Self-Employment:

Rental income:

Interest or dividends:

Alimony or Child Support payments

Social Security:

Retirement income:

Unemployment:

DEBTOR	JOINT-DEBTOR
years months	years months

Section 6 – Current Expenses

Do you and your spouse maintain separate households? No / Yes

If **Yes**, complete the following section for each household.

Indicate how much you pay for each item each month.

(If it is not a monthly payment (i.e., car registration), add up the yearly total, and divide that amount by 12.)

Rent or 1st Mortgage payment	\$ _____
2nd mortgage payment	\$ _____
Real estate taxes <i>(only if not already included in mortgage payment)</i>	\$ _____
Homeowner's insurance <i>(only if not already included in mortgage payment)</i>	\$ _____
Electricity and Gas	\$ _____
Water and Sewer	\$ _____
Telephone (Home & Cellular)	\$ _____
Cable TV <i>(satellite)</i>	\$ _____
Internet	\$ _____
Garbage	\$ _____
Home repair and maintenance	\$ _____
Food <i>(including meals out)</i>	\$ _____
Clothing	\$ _____
Laundry / dry cleaning	\$ _____
Medical and Dental expenses not covered by insurance <i>(co-pays)</i>	\$ _____
Gas, oil, maintenance, repairs, and registration for vehicles	\$ _____
Recreation and entertainment	\$ _____
Subscriptions <i>(Netflix, Hulu, magazines, etc.)</i>	\$ _____
Church / Charitable contributions	\$ _____
Kids' Activities <i>(sports, school activities, band, etc.)</i>	\$ _____
Renter's Insurance	\$ _____
Life or Disability Insurance <i>(not paid through paycheck)</i>	\$ _____
Health (medical) Insurance <i>(not paid through paycheck)</i>	\$ _____
Auto Insurance	\$ _____

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Vehicle payment #1 \$ _____
Year/Make/Model _____

Vehicle payment #2 \$ _____
Year/Make/Model _____

Vehicle payment #3 \$ _____
Year/Make/Model _____

Alimony/child support paid to others \$ _____

Payments for support of dependents not living at home \$ _____

Regular expenses from operation of a business (attach details) \$ _____

Child care expenses \$ _____

Gifts for birthdays, Christmas, etc. \$ _____

Haircuts, personal care expenses \$ _____

Pet food and care \$ _____

Gym / Health Club Membership fees \$ _____

Mandatory payroll deductions *not already listed* \$ _____

Court ordered payments \$ _____

Education necessary to maintain employment \$ _____

Education for a physically or mentally challenged child \$ _____

Other expenses not listed (*list below and itemize*) \$ _____

Storage Unit rental fees \$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Section 7 – Statement of Financial Affairs

Include information about **BOTH you and your spouse**, even if you are not filing a joint petition.

1. Income from **employment** or operation of business.

State your gross earnings for the time periods set forth below:

Debtor #1 (Debtor)

	Amount	Source (circle one)
Current year (YTD):	\$ _____	Employment or Operation of Business
Last year:	\$ _____	Employment or Operation of Business
Year before last:	\$ _____	Employment or Operation of Business

Debtor #2 (Joint Debtor)

	Amount	Source
Current year (YTD):	\$ _____	Employment or Operation of Business
Last year:	\$ _____	Employment or Operation of Business
Year before last:	\$ _____	Employment or Operation of Business

2. Income **other than from employment** or operation of business.

State the amount of income you have received from any sources other than your own earnings (**examples:** *VA or SS benefits; unemployment benefits; child support received*). List all income from all sources, whether taxable or not).

Debtor #1 (Husband)

	Amount	Source (from the list above)
Current year (YTD):	\$ _____	_____
Last year:	\$ _____	_____
Year before last:	\$ _____	_____

Debtor #2 (Wife)

	Amount	Source
Current year (YTD):	\$ _____	_____
Last year:	\$ _____	_____
Year before last:	\$ _____	_____

3a. **Payments to creditors.** List all payments on loans, installment purchases of goods or services, and other debts, which add up to more than \$600.00 per creditor and made within the last 90 days. (Including car payments, credit card payments, etc...)

3b. If your debts ARE NOT primarily consumer debts, list each payment or other transfer, which add up to more than \$5,000 per creditor and made within the last 90 days. **☐ Not Applicable**

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3c. List all payments to **family members or business associates** made within one year immediately preceding the filing of your case.

Not Applicable

4a. **Lawsuits and administrative proceedings, executions, garnishments and attachments.** List all lawsuits and administrative proceedings to which you are or have been a party within one year immediately preceding the filing of your case. *Not Applicable*

4b. Describe all property that has been **attached, garnished or seized** under any legal or equitable process within one year immediately preceding the filing of your case. *Not Applicable*

5. **Repossessions, foreclosures and returns.** List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller within one year immediately preceding the filing of your case.

Not Applicable

6a. **Assignments and receiverships.** Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the filing of your case. *Not Applicable*

6b. List all property which has been in the **hands of a custodian, receiver, or court-appointed official** within one year immediately preceding the filing of your case. *Not Applicable*

7. **Gifts.** List all gifts or charitable contributions made within one year immediately preceding the filing of your case, except you don't need to list ordinary and usual gifts to family members totaling less than \$200.00 in value per individual family member and charitable contributions totaling less than \$100.00 per recipient. *Not Applicable*

8. **Losses.** List all losses from fire, theft, other casualty or gambling within the last year. *Not Applicable*

9. **Payments related to debt counseling or bankruptcy.** 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 within the last year.

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10. **Other transfers.** List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within the last year. *Not Applicable*

11. **Closed financial accounts.** List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within the last year. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. *Not Applicable*

12. **Safe deposit boxes.** List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within the last year. *Not Applicable*

13. **Setoffs.** List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days prior to the filing of your bankruptcy petition. *Not Applicable*

14. **Property held for another person.** List all property owned by another person but which you hold or control. *Not Applicable*

15. **Prior address of debtor.** If you have moved within the last three years, list the addresses of all the places you have resided at and vacated prior to the filing of your case (don't answer this question again if you already provided the required information in Section 1 of this questionnaire). *Not Applicable*

16. **Spouses and former spouses.** List the current name and address of any spouse who resided with you within the last eight years. *Not Applicable*

17. **Environmental information.** Have you received any notices from a governmental agency which states you may be responsible for a violation of any environmental laws? If so, provide full details. *Not Applicable*

18. List the names, addresses, taxpayer I.D. #s, nature of the business, and beginning and ending dates of **operation for all businesses** which you have been an owner or operator of during the last six years. *Not Applicable*

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(Answer the remaining questions in this section only if you listed one or more business entities in answer to question #18. Otherwise, skip to the next section)

19a. Books records and financial statements. List all bookkeepers and accountant who within the last two years have kept or supervised the books of account for your business. ***Not Applicable***

19b. List the names and addresses of any person or firm who audited your books or prepared a financial statement for your business within the last two years. ***Not Applicable***

19c. List the names and addresses of any firm or person who has possession of your business books or records. If the books or records are not available, explain why. ***Not Applicable***

19d. List the name and address of any bank, creditor, or other party to whom you have given a financial statement within the last two years. ***Not Applicable***

20a. List the dates and the dollar amounts of the two most recent inventories that were taken of your business. ***Not Applicable***

20b. List the name and address of the person having possession of the records of each of the two inventories reported in 20a above. ***Not Applicable***

21. List the name and address of current partners, officers, directors, and shareholders. ***Not Applicable***

22. List the name and address of former partners, officers, directors, and shareholders. ***Not Applicable***

23. List all withdrawals from a partnership or distributions by a corporation within the last year. ***Not Applicable***

24. List the name and federal taxpayer identification number of any Tax consolidation group you were a member of within the last six years. ***Not Applicable***

25. List the name and federal taxpayer identification number of any Pension funds you contributed to within the last six years. ***Not Applicable***
