

DOCUMENTS TO BE PRODUCED IMMEDIATELY **THESE DOCUMENTS ARE TO BE USED IN COMPLETING THESE FORMS AND RETAINED IN CASE OF AUDIT!

____ Papers that show any income you earn

____ Papers regarding any Social Security payments received by any member of your household who is contributing to household expenses [check when provided]

____ Papers regarding any bank interest income or (stock) dividend income received during the last seven months

____ Papers regarding any retirement benefits received during the last seven months

____ Papers regarding any rental income from any house or land or other real property you own

____ A listing of money contributed to your living expenses by other members of your household, including your spouse if he/she is not filing the bankruptcy with you

Documents Regarding Deductions from Your Income [check when provided]

____ Papers regarding any retirement plan contributions you have made during the last seven months

____ Papers regarding any retirement loan currently owed

____ Papers showing any other deduction from your paycheck which is required or mandatory - not voluntary

____ From your payroll department at work, get copies of any wages garnishment orders or voluntary automatic deductions from your paycheck

____ Any court orders setting child support or spousal support amounts that you should be paying, including the order setting regular ongoing monthly amounts and also setting any monthly amounts for catching up on past-due support

____ Is any support you owe secured by a lien on your home or other security interest?

____ If you have your own business, a complete listing of all your monthly business expenses, including a year-to-date or recent monthly Profit & Loss Statement for your business, if possible

Documents Regarding Your Finances [check when provided]

____ Monthly statements for all of your bank, credit union & other similar accounts for the last seven months

____ A recent credit report (WE WILL RUN A CREDIT REPORT FOR YOU)

____ Papers from any bankruptcy you filed during the last three years

____ A list of all your addresses for the last three years

____ Tax returns (both state and federal) for the last four years or W-2s, 1099s, etc. for those years

____ Papers regarding any real property you now own or have owned with the last ____ years, including:

- a. information about refinancing within the last ____ years and current mortgage billing statements
- b. transfers of ownership within the last ____ years and deeds on all property owned

____ Papers regarding all other personal and real property you own (for example, vehicle registration papers, stock value statements, cash value life insurance policy documents, time-share unit documents, etc.)

____ Have you been convicted of a felony? If so, locate any documents stating the type of conviction

____ If you did or may received any money or property from trust or probate estate, obtain documents regarding it

____ Education IRA or tuition program documentation

____ Bills, statements, receipts for any normal living expenses during the last six months: utility bills, food or clothing bills, insurance bills, etc.

____ All statements, bills notices, letter received in the last three months regarding all your debts: credit cards, medical bills, lawsuits, personal loans, car loans, furniture loans, jewelry loans, etc.

_____ Contracts (with all the attachments) for all car loans purchased within the last four years; and for furniture and jewelry loans for items purchased within the last two years

_____ Proof of insurance, for any vehicle for which you still owe money

The new federal bankruptcy law requires that you produce this information, which is necessary before an Attorney can advise you about filing bankruptcy.

Instructions on Providing Information Required by Bankruptcy Law

You are required to provide certain information to the court when you file bankruptcy. It is our obligation to make diligent inquiry of you so as to obtain information to include in your bankruptcy petition. Attached are forms designed to obtain the necessary information. Please carefully read and follow these instructions. **Put your initials next to each instruction.**

_____ 1. READ AND FILL OUT THE FORMS COMPLETELY, ACCURATELY AND NEATLY

_____ 2. DO NOT LEAVE ANY BLANKS. If a particular blank does not apply to you, put "N/A" in the blank.

By doing so, we will know that you did not mistakenly overlook it.

_____ 3. List ALL your property

_____ 4. List all your debts

a. You must list debts that will not be discharged, such as student loans and child support

b. You must list debts that you intend to pay

c. You must list debts that you cosigned for someone else or that someone else cosigned for you

d. You must list debts to family members

_____ 5. Attach additional sheets if you do not have sufficient space to include all the information

_____ 6. In determining the amount you owe each creditor, list the amount on your most current statement or correspondence from the creditor. In rare cases your ability to file Chapter 7 may depend on how much debt you owe. In those cases we will assist you in determining how much you owe each creditor.

_____ 7. If a creditor is still communicating with you, use the address supplied by the creditor in at least two communications over the last 90 days. Do not use the address to which you send payments. Use the correspondence address. Keep all mailings from your creditor, so we can keep up with any changes in the creditors' addresses and prove, if necessary we used the appropriate addresses.

_____ 8. List the account number, if any, for each debt.

_____ Debt Counseling Requirements: You are not eligible to file a bankruptcy petition unless you receive an individual or group briefing from an approved non-profit budget and counseling agency. That briefing must outline your opportunities for available credit counseling and assist you in performing a related budget analysis. It must occur within 180 days prior to filing the bankruptcy petition. It can take place on the internet or by telephone. If you have not yet received the counseling and you want our assistance, we will help you make the arrangements for it.

In addition to the information set out in these forms, you must file the following documents of with your petition, or when specified, while your case is pending.

_____ 1. Copies of all pay stubs, payment advices, or other evidence of payment received within 60 days before the date of filing of the petition by you from any employer.

_____ 2. A statement of the amount of monthly net income itemized to show how the amount is calculated.

_____ 3. A statement disclosing any reasonably anticipated increase in income or expenditures over the 12-month period following the date of the filing of the petition.

_____ 4. A certificate from an approved non-profit budget and credit counseling agency describing the individual or group briefing received by you.

- a. If you developed a debt repayment plan as a result of the briefing, a copy of the plan
- ____ 5. A record of any interest you have in an educational individual retirement account or under a qualified state tuition program.
- ____ 6. A copy of your federal income tax return, or a transcript of the return, for the most recent year ending immediately before we file your case and for which you filed the return.
- ____ 7. If the court, the United States Trustee, or any other party to your case request it, you must file with the court:
- a. A copy of each federal income tax return, or transcript of the return, required for each year while your case is pending at the same time filed with the IRS.
 - b. A copy of each required federal income tax that had not been filed with the IRS when your case is filed and that you subsequently file for any that year for the three years preceding the date we file your case.
 - c. A copy of each amendment to any federal income tax return or a transcript of each amendment filed with the court pursuant to paragraphs (a) and (b).
- ____ 8. a. In a Chapter 13 case at certain intervals in your case, you must provide a statement, under penalty of perjury concerning the obligations you are paying or your income and expenditures during the previous tax year, and of your monthly income, the statement must show how income, expenditure, and monthly income are calculated.
- b. The statement set out above must disclose the amount and services of your income, the identity of any person responsible with you for the support of your dependents, and the identity of any person who contributes to the household in which you reside.
- ____ 9. A document that establishes your identity, including a driver's license, passport, or such other document containing your photograph, or such other personal identification establishing your identity.

BANKRUPTCY FORMS

PLEASE READ THE INSTRUCTIONS CAREFULLY. This packet has been designed to help you organize the information that you will need to file your case. In essence, the following information will be entered into a software program and reprinted in the Bankruptcy Petition format. Please review and **COMPLETE THE ENTIRE** packet, as there are six (6) different sections. Some of the requested information may apply to more than one (1) question and/or section. **PLEASE PROVIDE ALL THE INFORMATION REQUESTED. ALL CREDITORS (any party to whom you owe money) MUST BE LISTED BY FEDERAL LAW (don't worry, the form can take care of creditors you wish to treat specially).**

PLEASE REMEMBER. The paperwork prepared from these forms are signed by you **UNDER OATH.** Federal criminal law severely punishes false oaths, hiding or not disclosing assets, etc. In addition, you could lose your discharge. Therefore, it is the client's responsibility to complete these forms truthfully and accurately and to review the actual papers to be filed prior to signature under oath. If you don't tell us, we can't protect you fully. **BE SURE TO DOUBLE CHECK THAT PRIOR BANKRUPTCY CASES ARE LISTED.**

The U.S. Bankruptcy court requires a filing fee of \$_____ for Chapter 13 cases, \$_____ for Chapter 7 cases and does not accept personal checks, therefore you must make the file fee payable to **THE LAW OFFICE OF MARLOW A. HENDERSON, III.** This amount is **NOT** included in the Attorney fees that you have paid to **THE LAW OFFICE OF MARLOW A. HENDERSON, III.** **We cannot file your case without the Attorney fee and the filing fee.**

CLIENTS ARE TO BRING A PHOTO ID AND PROOF OF THEIR SOCIAL SECURITY NUMBER TO EVERY COURT PROCEEDING.

Finally, it is the client's responsibility to notify us of any pending foreclosure sale or other legal deadline and to fax copies. Voicemail is not adequate for this purpose.

Thank you for entrusting your case to us.

*****WE WILL KEEP ALL INFORMATION DISCLOSED CONFIDENTIAL*****

ATTORNEY MANAGING YOUR CASE (and direct telephone number):

MARLOW A. HENDERSON, III

PHONE/FAX: (888) 625-6243

THESE FORMS ARE THE PROPERTY OF THE LAW OFFICE OF MARLOW A. HENDERSON, III AND ARE PROPRIETARY IN NATURE. NO DUPLICATION OR DISTRIBUTION IS AUTHORIZED BY THE FIRM.

I. CLIENT QUESTIONS

CLIENT'S FULL NAME: _____

(Any other names used in the last six (6) years): _____

SOCIAL SECURITY: _____

SPOUSE'S FULL NAME: _____

(Any other names used in the last six (6) years): _____

SOCIAL SECURITY: _____

HOW ARE YOU FILING (Please mark your answer):

SINGLE - (please mark one of the following): NEVER MARRIED DIVORCED WIDOWED

INDIVIDUAL (Married and Living Together) INDIVIDUAL (Married and Living Apart)

JOINT (Husband and Wife Only)

IN WHICH COUNTY DO YOU LIVE?: _____

IF YOU HAVE MOVED IN THE PAST TWO (2) YEARS, LIST YOUR PREVIOUS ADDRESS:

*** FORECLOSURE DATE:** _____ **LAW FIRM REPRESENTING MORTGAGE CO.**
(Name, Address, and Telephone Number):

***LAWSUIT PENDING? IF YES, WITH WHICH CREDITOR(s):** _____

***PLEASE ATTACH ANY AND ALL DOCUMENTS REGARDING ANY FORECLOSURES AND/OR LAWSUITS.**

EMPLOYMENT

Are you employed? [] YES [] NO

Are you self-employed? [] YES [] NO

If self-employed, is the entity a Corporation? [] YES [] NO

If you answered "Yes" to any of the above, (even if you are self-employed) then complete the following:

COMPANY NAME AND ADDRESS WITH ZIP CODE (Give the Payroll Department address)

Phone Number: () _____ - _____

Position with Employer: _____

Length of employment: _____

EMPLOYMENT FOR SPOUSE (If you are married and living together, please complete the sections for spouse.)

Are you employed? [] YES [] NO

Are you self-employed? [] YES [] NO

If self-employed, is the entity a Corporation? [] YES [] NO

If you answered "Yes" to any of the above, (even if you are self-employed) then complete the following:

COMPANY NAME AND ADDRESS WITH ZIP CODE (Give the Payroll Department address)

Phone Number: () _____ - _____

Position with Employer: _____

Length of employment: _____

TAXABLE INCOME FOR THE LAST THREE (3) YEARS:

CLIENT: SO FAR THIS YEAR: \$ _____
LAST YEAR: \$ _____
YEAR PRIOR: \$ _____

SPOUSE: SO FAR THIS YEAR: \$ _____
LAST YEAR: \$ _____
YEAR PRIOR: \$ _____

FOR ANY OF THE FOLLOWING QUESTIONS THAT APPLY, PLEASE ATTACH ANY AND ALL DOCUMENTATION

Any, unexpired leases, executory contracts or timeshares? (i.e. auto lease, residential lease, etc.): _____

List all prior Bankruptcy Cases filed within last eight (8) years (location where files, case number, & date filed):

List all lawsuits against you (provide the name of the creditor, in which Court this case was filed, name of the case, case number, trial date & status): _____

List all attachments, garnishments, or seizure of property and describe the nature of the case and the value of the property taken. Also provide the name, address with zip code and phone number of the party/attorney taking action against you: _____

List all property that has been repossessed, foreclosed, or surrendered and describe the nature and the cash value of the property taken. Also provide the name, address with zip code and phone number of the party/attorney taking action against you: _____

Any large gifts or transfers/sale of property (e.g. greater than \$500.00) in the last year? If so, provide the nature of the property, the cash value and the date of the transfer: _____

Any losses due to fire, gambling or theft within the last year?: _____

Any safe deposit boxes? If so, list the contents and their value: _____

Any co-debtors or lawsuits not already listed?: _____

Any debts repaid to family or friends in the last year?: _____

Any major uses of credit in the last 90 days?: _____

Any false statements or other potentially fraudulent conduct related to any debts we need to protect you from? (Please speak to your Attorney personally about this.): _____

If you have moved within the last two (2) years, please list the addresses, name used, and dates of occupancy:

IF YOU ARE SELF EMPLOYED, PLEASE ANSWER THE FOLLOWING:

List all bookkeepers and accountants within the last six (6) years: _____

List all who have audited your books of account?: _____

List who is in possession of your books of account?: _____

List the dates of the last two (2) inventories and names of supervisors: _____

List all current partners, officers, directors, and shareholders: _____

II. SECURED CREDITOR QUESTIONS

THIS SECTION COVERS CREDITORS THAT ARE SECURED BY ANY COLLATERAL. FOR EXAMPLE, YOUR HOUSE, CAR, ETC... . THIS SECTION PROVIDES SEPARATE INFORMATION SPACES FOR EACH CREDITOR. PLEASE LIST ONE (1) CREDITOR FOR EACH SPACE. IF YOU REQUIRE ADDITIONAL SPACE, YOU MAY USE REGULAR PAPER WITH THE REQUIRED INFORMATION OR YOU CAN MAKE COPIES OF THIS PAGE.

Please fill out this section in its entirety, **COMPLETE ADDRESSES WITH ZIP CODES ARE REQUIRED BY THE COURT AND YOUR CASE CAN NOT BE FILED WITHOUT ADDRESSES.**

(1) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: First Mortgage Automobile Loan
 Second Mortgage Other (describe): _____

Who owes this?: HUSBAND WIFE JOINT SINGLE

CO-SIGNER (Name and Relationship): _____

Total Payoff Amount (Principal): \$ _____

Monthly Payment: \$ _____

Finance/Interest Rate: \$ _____

of Months in Behind: \$ _____

Payment Due Date: \$ _____

Date Incurred: \$ _____

Description of Secured Property:

PLEASE SELECT THE PROPERTY REFERRING TO THE ABOVE DEBT:

- Single Family House Townhouse Condo
- Automobile (describe year, make & model): _____
- Other (describe): _____

Market Value of Secured Property (what could you sell collateral for quickly): \$ _____

(2) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: First Mortgage Automobile Loan

Second Mortgage Other (describe): _____

Who owes this?: HUSBAND WIFE JOINT SINGLE

CO-SIGNER (Name and Relationship): _____

Total Payoff Amount (Principal): \$ _____

Monthly Payment: \$ _____

Finance/Interest Rate: \$ _____

of Months in Behind: \$ _____

Payment Due Date: \$ _____

Date Incurred: \$ _____

Description of Secured Property:

PLEASE SELECT THE PROPERTY REFERRING TO THE ABOVE DEBT:

- Single Family House Townhouse Condominium
- Automobile (describe year, make & model): _____
- Other (describe): _____

Market Value of Secured Property (what could you sell collateral for quickly): \$ _____

III. PRIORITY CLAIMS - TAX QUESTIONS

FEDERAL TAXES OWED:

Who owes?: HUSBAND WIFE JOINT SINGLE

Amount: \$ _____ For which year(s): _____

STATE TAXES OWED:

Which State(s): MARYLAND VIRGINIA DISTRICT OF COLUMBIA
 OTHER _____

Who owes?: HUSBAND WIFE JOINT SINGLE

Amount: \$ _____ For which year(s): _____

LOCAL TAXES (COUNTY) OWED:

Which County?: _____

Who owes?: HUSBAND WIFE JOINT SINGLE

Amount: \$ _____ For which year(s): _____

NOTE: Please advise us if you have not filed tax returns for any of the past three (3) years. If this applies to you, you must file tax returns IMMEDIATELY.

CHILD SUPPORT OWED:

Amount: \$ _____ Name and Address of Recipient: _____

IV. UNSECURED CREDITORS QUESTIONS

THIS SECTION COVERS CREDITORS THAT ARE NOT SECURED BY COLLATERAL. FOR EXAMPLE: CREDIT CARDS, PERSONAL LOANS, MEDICAL EXPENSES, ETC... . PLEASE LIST ONE (1) CREDITOR FOR EACH SPACE (There are two (2) creditor spaces per page). IF YOU REQUIRE ADDITIONAL SPACE, YOU MAY USE REGULAR PAPER WITH THE REQUIRED INFORMATION OR YOU MAY MAKE COPIES OF THIS PAGE.

(1) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: Credit Charges Line of Credit Personal Loan Student Loan
 Medical Expenses Other (describe): _____

Who owes this?: HUSBAND WIFE JOINT SINGLE

CO-SIGNER (Name and Relationship): _____

Balance: \$ _____

*Date Incurred: _____

(2) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: [] Credit Charges [] Line of Credit [] Personal Loan [] Student Loan
[] Medical Expenses [] Other (describe): _____

Who owes this?: [] HUSBAND [] WIFE [] JOINT [] SINGLE

CO-SIGNER (Name and Relationship): _____

Balance: \$ _____

*Date Incurred: _____

*IF NOT SURE, YOU MAY ESTIMATE APPROXIMATE MONTH AND YEAR. THIS MUST BE FILLED OUT.

(3) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: [] Credit Charges [] Line of Credit [] Personal Loan [] Student Loan
[] Medical Expenses [] Other (describe): _____

Who owes this?: [] HUSBAND [] WIFE [] JOINT [] SINGLE

CO-SIGNER (Name and Relationship): _____

Balance: \$ _____

*Date Incurred: _____

(4) NAME and ADDRESS OF CREDITOR:

Account No.: _____

Type of Debt: [] Credit Charges [] Line of Credit [] Personal Loan [] Student Loan
[] Medical Expenses [] Other (describe): _____

Who owes this?: HUSBAND WIFE JOINT SINGLE
 CO-SIGNER (Name and Relationship): _____
 Balance: \$ _____ *Date Incurred: _____

*IF NOT SURE, YOU MAY ESTIMATE APPROXIMATE MONTH AND YEAR. THIS MUST BE FILLED OUT.

V. PROPERTY QUESTIONS

PLEASE LIST ALL PROPERTY OWNED, BY YOU OR JOINTLY WITH YOUR SPOUSE, HOW MUCH IT IS WORTH, WHETHER IT IS OWNED JOINTLY OR INDIVIDUALLY, AND WHETHER THERE IS ANY DEBT ON THE PROPERTY (e.g. AUTOMOBILE LOAN, ETC...) *THE VALUE TO BE LISTED IS NOT A REPLACEMENT VALUE, IT IS A SECOND-HAND OR YARD SALE VALUE.**

(1) REAL PROPERTY

Type of property?: Single Family House Townhouse
 Condominium Other (describe): _____
 Address of property: _____

 Market Value: \$ _____
 Creditor(s): List only name (i.e., Mortgage Holders):

 Total Payoff: \$ _____
 Owned by: HUSBAND WIFE JOINT SINGLE
 CO-SIGNER (Name and Relationship): _____
 Date of Purchase: ____/____/____ Purchase Price: \$ _____

(2) CASH ON HAND/IN POCKET: \$ _____

(3) CHECKINGS/SAVINGS ACCOUNTS: IF YOU HAVE A DEBT OWED TO ANY BANK OR CREDIT UNION THAT YOU MAY HAVE AN ACCOUNT WITH, YOU MUST CLOSE OUT THAT ACCOUNT IMMEDIATELY BECAUSE THE BANK OR CREDIT UNION MAY TRY TO TAKE YOUR MONEY.

(A) Name of Bank/Credit Union: _____
 Balance in Account: \$ _____
 Type of Account: Checking Account Savings Account
 IRA Other (describe): _____

Description: _____ Value: \$ _____

Description: _____ Value: \$ _____

(9) POTENTIAL TAX REFUNDS

Description: _____ Value: \$ _____

Description: _____ Value: \$ _____

(10) ANY MONEY COMING IN FROM ANY SOURCE (E.G. Car Accident Case, Inheritance, etc...)

Description: _____ Value: \$ _____

Description: _____ Value: \$ _____

(11) DOES ANYBODY OWE YOU MONEY? _____

(12) ANY OTHER TYPE OF PROPERTY NOT ALREADY LISTED (provide brief description and value):

(13) EDUCATION IRAs OR OTHER EDUCATION ACCOUNTS (provide brief description and value):

VI. BUDGET QUESTIONS

PLEASE ATTACH MOST RECENT PAY STUBS FOR A ONE (1) MONTH PERIOD (IF YOU ARE MARRIED, YOU MUST ALSO ATTACH PAY STUBS FOR YOUR SPOUSE.)

A. Regular Income:

(CLIENT) How often are you paid?

Monthly Twice a month (i.e. 1st and 15th)

Every two (2) weeks Weekly

Do you work overtime? Yes No

If YES, then list how many hours and rate per hour on average: _____

(SPOUSE) How often are you paid?

Monthly Twice a month (i.e. 1st and 15th)

Every two (2) weeks Weekly

Do you work overtime? Yes No

If YES, then list how many hours and rate per hour on average: _____

SELF EMPLOYMENT - PLEASE LIST THE MONTHLY INCOME FOR THE BUSINESS: \$ _____

	<u>CLIENT</u>	<u>SPOUSE</u>
GROSS PER PAY PERIOD:	\$ _____	\$ _____

DEDUCTIONS PER PAY PERIOD:		
Federal Taxes:	\$ _____	\$ _____

State Taxes:	\$ _____	\$ _____
FICA/S.S.:	\$ _____	\$ _____
Other Taxes:	\$ _____	\$ _____
Insurance (Health/Life):	\$ _____	\$ _____
Union Dues:	\$ _____	\$ _____
Other Deductions? Explain		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

OTHER INCOME MONTHLY

Income from real property	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____
Social Security or other public assistance	\$ _____	\$ _____
Pension or retirement	\$ _____	\$ _____
Spousal support received	\$ _____	\$ _____
Child support received	\$ _____	\$ _____

Specify for whom support is received, (i.e. name, relationship, and age): _____

Other income (including part-time income)? Please specify:

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Do you have dependents living with you? If so, list their name, relationship and age:

MONTHLY EXPENSES (Please list expenses monthly. If you make payments on a quarterly basis, please make a note to that effect. Expenses should be an average.)

Rent/1st Mortgage	\$ _____	2nd Mortgage	\$ _____
Taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No	Property Insurance included?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Homeowner's Fees	\$ _____		
Electricity/Heating Fuel	\$ _____		
Water & Sewer	\$ _____		
Telephone	\$ _____		
Garbage	\$ _____		

Cable	\$ _____
Food	\$ _____
Clothing	\$ _____
Laundry/Dry Cleaning	\$ _____
Medical/Dental (out-of-pocket)	\$ _____
Transportation (gas, maintenance, etc.)	\$ _____
Recreation, books, subscriptions	\$ _____
Charitable Giving	\$ _____
Homeowner's/Renter's Insurance	\$ _____
Health Insurance(not already deducted)	\$ _____
Life Insurance (not already deducted)	\$ _____
Auto Insurance	\$ _____
Real Estate Taxes	\$ _____
Auto Payment	\$ _____
Daycare	\$ _____
Cell Phone/Pager	\$ _____

This is not an exclusive list. Think of the stores, restaurants, and other places you spend money: _____

Do you do any repairs on your property? Approximately how much do you spend in a year? \$ _____

Do you have a security system? If so, list your monthly service payments: \$ _____

Do you make any other payments on a monthly basis that was not already listed? (i.e. spouse's expense, payments to parents for support, etc...)

_____	\$ _____
_____	\$ _____

Do you pay child support? If so, state the amount and the child/children for whom support is paid:

_____	\$ _____
_____	\$ _____

Do you pay spousal support? If so, state the amount and the person for whom support is paid:

_____	\$ _____
_____	\$ _____

Do you provide support to anyone else not residing in your immediate household? If so, state the amount and the person for whom support is given:

_____	\$ _____
_____	\$ _____

Do you owe court awarded money to the attorney for a spouse or child? If so, state the amount and the person to whom the money is owed and for what purpose:

_____	\$ _____
_____	\$ _____

Personal Inventory List

HOUSEHOLD, JEWELRY, AND ANIMAL

Household Goods:

	Quantity	Value
Beds		
Adult	_____	_____
Children's	_____	_____
Cribs	_____	_____
Dressers	_____	_____
Chest(s)	_____	_____
Television(s)	_____	_____
VCR(s)	_____	_____
DVD Player(s)	_____	_____
Desk(s)	_____	_____
Tables(s) - coffee, dining, end, kitchen, living, outdoor	_____	_____
Chairs(s) - kitchen, dining room, living room, outdoor	_____	_____
Sofa(s) - couch, love seat, chair	_____	_____
Lamp(s)	_____	_____
Stereo(s)	_____	_____
Clocks()	_____	_____
Television Stand(s)	_____	_____
Appliances(s) - refrigerator, oven, dish washer, microwave, washer & dryer, etc.	_____	_____
Telephone(s)	_____	_____
Other: _____	_____	_____

Please list:

<u>Jewelry:</u>	Quantity	Value	<u>Animal:</u>	Quantity	Value
Rings(s)	_____	_____	Dog(s)	_____	_____
Watch(s)	_____	_____	Cat(s)	_____	_____
Bracelet(s)	_____	_____	Bird(s)	_____	_____
Necklace(s)	_____	_____	Aquariums(s)	_____	_____
Pendant(s)	_____	_____	Iguana(s)	_____	_____
Cufflink(s)	_____	_____	Ferret(s)	_____	_____
Earring(s)	_____	_____	Hamster(s)	_____	_____
Charm(s)	_____	_____	Guinea Pig(s)	_____	_____
Anklet(s)	_____	_____			

Toe Ring(s) _____

Personal Inventory List

WEARING APPAREL, BOOKS, AND FIREARMS/SPORTS/PHOTO/HOBBY

<u>Wearing Apparel:</u>	Quantity	Value		Quantity	Value
Dress(es)	_____	_____	Boots	_____	_____
Pants	_____	_____	Shoes	_____	_____
Suits (men)	_____	_____	Hat(s)	_____	_____
Shirts(s)	_____	_____	Coat(s)	_____	_____
Tie(s)	_____	_____	Sweater(s)	_____	_____
Blouse (s)	_____	_____	Jacket(s)	_____	_____
Belt(s)	_____	_____	Socks	_____	_____
Skirt(s)	_____	_____	Uniform(s)	_____	_____
Short(s)	_____	_____	Scarves	_____	_____
Suits (women)	_____	_____	Others:	_____	_____

Books:

Firearms/Sports/Photo/Hobby:

	Quantity	Value		Quantity	Value
Book(s)	_____	_____	Gun(s)	_____	_____
Art Picture(s)	_____	_____	Sport Item(s)	_____	_____
Antiques	_____	_____	Camera(s)	_____	_____
Stamp Collection(s)	_____	_____	Fax Machine(s)	_____	_____
Coin Collection(s)	_____	_____	Camcorder(s)	_____	_____
Record(s)	_____	_____	Computer(s)	_____	_____
CD(s)	_____	_____	Printer(s)	_____	_____
Cassette Tape(s)	_____	_____	Scanner(s)	_____	_____
VHS Tape(s)	_____	_____	Bicycle(s)	_____	_____
DVD Disk(s)	_____	_____	Exercise Equipment	_____	_____
			Sewing Machine(s)	_____	_____

****** Please remember that when you list the value, the amount should be resale value. Do not put a value for more than you would get for the items. It is recommended that you check eBay for comparable sale prices OR consider GOODWILL or THRIFT STORE values.***