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BANKRUPTCY

BANKRUPTCY WORKSHEET

Have you ever filed for bankruptcy before? _____ if yes, complete the following:

Chapter filed _____ Date Filed _____ District filed in _____

Judge _____ Dismissed _____ Discharged _____

Your Full (Legal) Name _____

List all names you have used in the last 8 years, including dba's _____

Your social Security Number _____ - _____ - _____

Full (Legal) name of Spouse (if filing jointly) _____

List all names you have used in the last 8 years, including dba's _____

Your social Security Number _____ - _____ - _____

Current address _____

Mailing Address, if different _____

Phone(home) _____ Cell(s) _____

Phone (other) _____

email Addresses: _____

Names and ages of dependents and their relationship to you:

Do they reside with you? _____

REAL ESTATE

List all real property in which you have an interest, including property you own or are buying, property owned as co-tenant, community property, or property in which you have a life estate.

Property address _____

Current value _____ Do you intend to keep this property? _____

Payments current? _____

PERSONAL PROPERTY OWNERSHIP

List all personal property that you own below. Do not include leased property in this section. If you have no property in a category, write "none." If property owned by you is being held by someone else, list that person's name and address under Description/Location. Attach additional sheets as needed or use the back of this sheet.

TYPE OF PROPERTY	DESCRIPTION/LOCATION	VALUE
1. Cash on hand	_____	\$ _____
2. Checking, savings accts	_____	\$ _____
All Financial accounts, including	_____	\$ _____
Certificates of Deposit, brokerage	_____	\$ _____
accounts, Credit Unions, etc	_____	\$ _____
3. Security deposits with Utilities, Phone companies, Landlords, other	_____ _____	\$ _____ \$ _____
4. Interest in Insurance Policies (Name of Co & Surrender value)	_____ _____	\$ _____
5. Annuities (Itemize)	_____	\$ _____
6. Interest in Educational IRA or Qualified State Tuition Plan	_____	\$ _____
7. Interest In IRA, ERISA, 401(k) or other pension or profit sharing plans	_____	\$ _____
8. Stock & Interests in incorporated or unincorporated businesses	_____	\$ _____

TYPE OF PROPERTY	DESCRIPTION/LOCATION	VALUE
9. Interests in Partnerships or joint ventures	_____	\$ _____
10. Government or Corp. Bonds	_____	\$ _____
11. Alimony, maintenance, support and property settlements you are or may be entitled to	_____	\$ _____

12. Other liquidated debts owed to you, including tax refunds _____ \$ _____

13. Equitable or future interest Life estates & rights & powers exercisable for your benefit _____ \$ _____

14. Contingent & Non-Contingent interests in the estate of decedent death benefit plan, or trust _____ \$ _____

14 a. Inheritance or expected Inheritance _____ \$ _____

15. Other contingent and unliquidated claims of every nature, including claims and counterclaims _____ \$ _____

16. Patents, copyrights and other intellectual Properties _____ \$ _____

17. Licenses, Franchises, other general intangibles _____ \$ _____

18. Customer lists or other items containing personally identifiable information _____ \$ _____

19. Household goods & Furnishings Including audio, video, computer _____ \$ _____

20. Books, pictures, art objects, antiques, collections, etc _____ \$ _____

21. Wearing apparel _____ \$ _____

22. Furs & Jewelry _____ \$ _____

TYPE OF PROPERTY DESCRIPTION/LOCATION VALUE

23. Firearms/Sports Equip other hobby Equipment _____ \$ _____

24. Autos, trailers, other vehicles	_____	\$_____
25. Boats, Motors, Accessories	_____	\$_____
26. Aircraft & Accessories	_____	\$_____
27. Office equipment, furnishings	_____	\$_____
28. Machinery, fixtures, equipment used in business (including farming)	_____	\$_____
29. Inventory (business)	_____	\$_____
30. Livestock/breeding animals	_____	\$_____
31. Crops harvested/growing	_____	\$_____
32. All other property not listed	_____	\$_____

SECURED DEBTS

List name, full addresses, and last 4 digits of account number of all creditors holding claims secured by your property. Include judgments, liens, garnishments, statutory liens, auto loans, mortgages, deeds of trust and other security interests. Attach additional sheets as needed or use the back of this sheet.

1) Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____
Address: _____

Account #: _____ Type
of Lien _____
 Do you wish to keep and pay debt? _____

2) Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

Account #: _____

Type of Lien _____

Do you wish to keep and pay debt? _____

3) Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

Account #: _____ Type
of Lien _____

Do you wish to keep and pay debt? _____

4) Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

Account #: _____ Type
of Lien _____

Do you wish to keep and pay debt? _____

PRIORITY DEBTS

List below all of the following types of debt: Domestic Support obligations, all Federal, state county or other taxes owed. Wages or salaries you owe to others; monies owed to employees' benefit plans, deposits individuals have given you for purchase, lease or rental of property; claims of farmers and fishermen, and claims against you for personal injury or death while you were intoxicated. Attach additional sheets as needed or use the back of this sheet.

1) Account #: _____
Type of Lien _____

Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

2) Account #: _____
Type of Lien _____

Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

3) Account #: _____ Type of
Lien _____

Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

4) Account #: _____
Type of Lien _____

Date Incurred: _____ Amount of Debt: \$ _____

Creditor Name: _____

Address: _____

UNSECURED DEBTS

List below ALL other debts. Give full addresses and the last 4 digits of the account numbers. If it is a collection agency, note original creditor also. Attach additional sheets as needed or use the back of this sheet.

1) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

2) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

3) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

4) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

5) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

6) Date Incurred: _____ Amount of Debt: \$ _____
Type: _____

Creditor Name: _____

Address: _____

7) Date Incurred: _____ Amount of Debt: \$ _____

Type: _____

Creditor Name: _____

Address: _____

8) Date Incurred: _____ Amount of Debt: \$ _____

Type: _____

Creditor Name: _____

Address: _____

9) Date Incurred: _____ Amount of Debt: \$ _____

Type: _____

Creditor Name: _____

Address: _____

10) Date Incurred: _____ Amount of Debt: \$ _____

Type: _____

Creditor Name: _____

Address: _____

LEASES AND CONTRACTS

List all unexpired leases and contracts, including timeshares. Attach additional sheets as needed or use the back of this sheet.

Description/purpose _____

Name and address of other
party(ies) _____

CO-DEBTORS

List below all parties who are also liable for debts listed. Include all guarantors and co-signers. If you resided in a community property state (AK, AZ,CA,ID,LA,NV,NM,TX,WA,WI, or PUERTO RICO within the last 8 years, and were married, list the spouse's name and address. Include all names and trade names the co-debtor has used during the 8 year period. Attach additional sheets as needed or use the back of this sheet.

Name &
Address _____

Name &
Address _____

CURRENT INCOME

Marital Status _____

Occupation _____

Name & Address of employer _____

Length of employment _____

Spouse's Occupation _____

Name & Address of employer _____

Length of employment _____

List below your average **monthly** income. Use gross figures.

You

Regular Monthly Income _____

Overtime _____

Less p/r deductions- taxes _____

Less Insurance _____

Less Union dues _____

Less Other (specify) _____

Monthly net _____

Spouse

Regular Monthly Income _____

Overtime _____

Less p/r deductions-taxes _____

Less Insurance _____

Less Union dues _____

Less Other (specify) _____

Monthly net _____

Income other than from employment, trade, profession or operation of business you have received in the last TWO years:

Year _____ Amount _____ Source _____

OTHER INCOME (Monthly)

You

Income from business, Profession or farm _____

Income from Real Property _____

Income from Interest/Div _____

Alimony, support _____

Social Security or Gov assist _____

Type of Assistance _____

Pension or retirement _____

Other Income (Specify) _____

Spouse

Income from business, Profession or farm _____

Income from Real Property _____

Income from Interest/Div _____

Alimony, support _____

Social Security or Gov assist _____

Type of Assistance _____

Pension or retirement _____

Other Income (Specify) _____

MONTHLY EXPENSES

List your monthly expenses below. If you and your spouse are filing together but maintain separate residences, attach a separate sheet for spouse's expenses.

Rent, mortgage, mobile lot rental	_____
Payments on 2 nd Mortgage or HELOC	_____
Real estate taxes if NOT included above	_____
Property/homeowner/rental Insurance (if NOT Incl)	_____
Electric and Heating fuel	_____
Water and Sewer	_____
Telephone/cable/internet	_____
Other Utilities (specify)_____	_____
Home Repairs & Maintenance	_____
Food	_____
Personal Care	_____
Clothing	_____
Laundry & Dry cleaning	_____
Out-of-pocket medical and dental (Co-pays)	_____
Transportation (NOT car payments)	_____
Recreation (clubs, entertainment, newspapers)	_____
Charitable/Religious Contributions	_____
Insurance - Life or other not deducted from payroll	_____
Alimony or support paid by You	_____
Child or other support paid by You	_____
Childcare paid by you	_____
Installment payments (vehicle loan)	_____
Additional vehicle loan	_____
Other Installment payments (specify)	_____
_____	_____
Business or farm expenses	_____
Other (specify)_____	_____

LIST OF DOCUMENTS NEEDED TO PREPARE AND FILE YOUR BANKRUPTCY

Previous Bankruptcy Filing Information:

___ Copy of your previous discharge notice.

Pre-Filing Credit Counseling:

___ Original of Pre-Filing Credit Counseling Certificate of Completion.

Income:

- ___ Copies of Pay Stubs for last 6 months
- ___ Copies of IRS 1040 Income Tax returns and W-2s for last 2 years.
- ___ Social security notification documents (if receiving SSI benefits)
- ___ State TANF (cash) or DSHS Foodstamps award letter(s)
- ___ Unemployment statements

Monthly Living Expenses:

___ Copies of all monthly living expense billing statements

Credit Report:

___ Copy of complete current credit reports from Transunion, Experian and Equifax (the reports must have full names and contact information for creditors)

Debts to be included in Bankruptcy:

___ Current copies of all creditor billing or invoice statements

Real Property Value:

- ___ CMA/Appraisal report; or
- ___ Real estate agent comparative market analysis; or
- ___ TAV (tax assessment value) notice from Snohomish, King or Skagit County

Vehicles:

- ___ Kelly Blue Book value; or
- ___ NADA value.

Bank Deposits:

___ Current bank statements for the last 2 months

Security deposits:

___ Copy of all agreements (rental/lease, utility, etc.)

Household Goods & Furnishings:

___ Personal property self-appraisal or if applicable, professional appraisal

Wearing apparel:

___ Your personal self-appraisal for the value of your/your families' clothing

Jewelry:

___ Jewelers appraisals (if applicable) or your personal self-appraisal

Life or Disability Insurance Policies:

___ Copies of all Whole Life policies

Annuities:

___ Copies of all contracts

Stocks/Bonds/Options:

___ All account statements for the past 2 months

Pension/Retirement:

___ Copies of all employment benefits statements for the past 2 months

Accounts Receivables:

___ Copies of ledger books

Alimony, maintenance, child support, property settlement:

___ Copies of dissolution of marriage documents

Office Equipment, furnishings, supplies:

___ List of inventory

___ Contact information for person(s) supervising and performing the inventory

Animals:

___ Registration documents (if AKC, AQHA, etc. registered)

Farming Equipment:

___ Current appraisals or your personal self-appraisal

Personal Injury Claims/Lawsuits:

___ Name, address and phone number of Attorney assisting in claim

___ Name, address and phone number of Insurance claims adjustor assigned to claim