

Law Office Of J. Thomas Black, P.C.

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J. THOMAS BLACK
Attorney at Law

Board Certified - Consumer Bankruptcy Law
Texas Board of Legal Specialization

Personal and Confidential

Re: Bankruptcy Worksheet

Dear Prospective Client:

Thank you for consulting me about your financial problems.

Please complete this Bankruptcy Worksheet, and bring it to your free consultation with me. If you can't finish it, don't worry. Come to the consultation anyway.

Please bring any documents to the consultation that may be important. If you feel sure that you will be filing bankruptcy, bring as many of the following documents that you can, we'll need them to prepare your case:

- a) Your Texas Driver's license or other official picture I.D., and your Social Security card;
- b) Deeds and mortgages on your house and other real estate;
- c) Your bills or statements of account from each of your creditors for the past 3 months (if available);
- d) All insurance policies currently in effect;
- e) All papers relating to bankruptcies and Wage Earner Plans (Chapter 13) in the past 10 years;
- f) Copies of your tax returns for past two years (4 years for Chapter 13, if available);
- g) Copies of ALL of your pay check stubs for the past 6 months (and KEEP all paycheck stubs you receive while your case is pending);
- h) Copies of your last 6 months' bank statements and copies of statements from any other deposit accounts, such as a credit union or brokerage account, including IRAs, 401(k)s, and other pension accounts (AND you should keep the first bank statement you receive after your case is filed as we may need to provide it to the trustee);
- i) Legal papers, lawsuits, divorce papers, separation agreements, alimony orders, and child support orders;
- j) Any appraisals or tax assessment papers on property that you own;
- k) All Retail Installment Contracts, Leases, or Rent to Own contracts agreements for the purchase of cars or trucks, mobile homes, appliances or furniture, that you have signed and that are still in effect or not fully paid.

All of these documents are not necessary for your first consultation, but they can be very helpful to me in properly advising you of your options.

If you haven't already done so, you may want to call and listen to one or more of my free 24 hour information messages at (713) 772-5730, or review the information on my web site at www.jthomasblack.com.

Thank you for contacting my office regarding your financial problems. I look forward to meeting with you personally.

Sincerely,

J. Thomas Black

YOUR NAME _____ SOCIAL SECURITY # _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ COUNTY _____

HOME PHONE (____) _____ WORK PHONE (____) _____

PAGER _____ CELLULAR _____

EMAIL ADDRESS _____

SPOUSE (IF APPLICABLE):

NAME _____ SOCIAL SECURITY # _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ COUNTY _____

HOME PHONE (____) _____ WORK PHONE (____) _____

PAGER _____ CELLULAR _____

PLEASE PROVIDE THE NAME, ADDRESS & TELEPHONE NUMBER OF SOMEONE (A RELATIVE OR FRIEND) WHO WILL ALWAYS KNOW HOW TO REACH YOU:

1. HOW LONG HAVE YOU LIVED IN TEXAS? _____

2. Have you used any other names within the last 8 years? If yes, please supply information. i.e. maiden name, prior married name, "doing business as" name, etc.

3. Have you or your spouse filed a PRIOR BANKRUPTCY? YES / NO (CIRCLE ONE.)
HOW MANY? _____ If so, please supply information below (attach additional pages if necessary).

Name filed under _____ Chapter filed _____

Case # _____ Date filed _____ Date dismissed/discharged _____

4. IS YOUR HOME OR OTHER PROPERTY ABOUT TO BE SEIZED, REPOSSESSED OR FORECLOSED? YES / NO

5. BESIDES YOUR SPOUSE, DO YOU HAVE ANY CO-DEBTORS ON ANY NOTE OR ACCOUNT TO BE LISTED IN BANKRUPTCY? YES / NO If yes, please list which ones.

6. DO YOU HAVE ANY LEASES (Apartment, vehicle, business property, etc.?) YES / NO If yes, describe:

How were you referred to this office? Friend or relative, Name: _____

Attorney or C.P.A., Name: _____ Yellow Pages: _____

Internet (Search Engine or Terms): _____ Lawyer Referral Service _____

Other (please explain): _____

MONTHLY INCOME

MARITAL STATUS: Married Single Separated Divorced Widowed

Date of (most recent) marriage, separation, divorce, etc. _____

DEPENDENTS LIVING AT HOME:

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____

DEBTOR (YOU)

YOUR SPOUSE

Occupation		
Employer		
When did you start job?		
Address of Employer		
Gross wages, salary, and commissions per pay check (attach paycheck stub if available)		
Estimated overtime		
Deductions (PER CHECK) FICA & Withholding Insurance Union Dues Other (Specify)	_____ _____ _____ _____	_____ _____ _____ _____
Net take home pay (per paycheck)		
Other sources of income		

YOU:

Do you get paid..... Weekly Twice a month Every 2 weeks Monthly ?

YOUR SPOUSE:

Do you get paid..... Weekly Twice a month Every 2 weeks Monthly ?

MONTHLY EXPENSES

Rent or Home Mortgage	\$
Are Real Property Taxes Included? <input type="radio"/> Yes <input type="radio"/> No Is property Insurance Included? <input type="radio"/> Yes <input type="radio"/> No	
Electricity \$_____ and Gas (Entex or Propane) \$_____ Total:	\$
Water & Sewer	\$
Telephone/Long Distance/Internet	\$
Garbage Pickup/Homeowner's Assn. (Describe)	\$
Alarm System/Cable TV (Describe)	\$
Home Maintenance (Repairs/Upkeep/Lawn Care/Pool) (Describe)	\$
Food (Monthly grocery bill)	\$
Clothing, Shoes & Hosiery (Include back to school & Christmas)	\$
Laundry and Dry Cleaning	\$
Medical, Dental, Medicines, Eye Doctor, Eye Glasses	\$
Gasoline for Autos	\$
Repairs, Tires, Tuneups, Oil Changes, Registration	\$
Church or Charity Contributions (not deducted from paycheck)	\$
INSURANCE (not deducted from paycheck) ● Homeowner's or Renter's (not included in mortgage) ● Life ● Health ● Auto ● Other (Describe)	\$ _____ \$ _____ \$ _____ \$ _____
TAXES (not taken from wages or included in mortgage)	\$
INSTALLMENT PAYMENTS ● Auto ● Other (Describe) ● Other (Describe) ● Other (Describe)	\$ _____ \$ _____ \$ _____ \$ _____
Alimony, Maintenance, & Support paid to others	\$
Visitation Expenses (plane tickets, etc.)	\$
Payments for Support of Additional Dependents Not Living At Home	\$
Recreation, Clubs, & Entertainment	\$
Other Expenses (Please list on next page)	\$

****THIS PAGE MUST BE COMPLETED IF YOU HAVE A BUSINESS****

If you **DO NOT** have a business, initial here: _____.

If you have a current Profit and Loss Statement on your business, you may substitute that for this form.

Do you have an accountant or bookkeeper? Yes ___ No ___. Name, address, and phone number:

MONTHLY BUSINESS BUDGET

MONTHLY INCOME:

Gross Business Income (amount before expenses are deducted) \$ _____

*If Some of the Items Are Paid Annually or Quarterly, Breakdown Figures Into Monthly Amounts

MONTHLY EXPENSES:

Monthly Payments on Business Property	\$	_____
Rental Lease of Business Location	\$	_____
Taxes (Describe)	\$	_____
Accounting	\$	_____
Advertising	\$	_____
Electric**	\$	_____
Fuel/Gas for business travel	\$	_____
Insurance	\$	_____
Repairs and maintenance	\$	_____
Salaries	\$	_____
FICA tax	\$	_____
Sales tax	\$	_____
Property tax	\$	_____
Water**	\$	_____
Phone**	\$	_____
Contract Labor	\$	_____
Supplies	\$	_____
Inventory	\$	_____

**separate from household, utilities for business operations only

OTHER MONTHLY BUSINESS COSTS:

Describe: _____	\$	_____
Describe: _____	\$	_____
Describe: _____	\$	_____
Describe: _____	\$	_____
Describe: _____	\$	_____
Describe: _____	\$	_____

TOTAL ALL MONTHLY EXPENSES: \$ _____

NET INCOME (or LOSS) \$ _____

PROPERTY

1.a. **Do You Own a Home?** YES / NO Homestead address: _____

Date of purchase: _____ Are you delinquent in payments? Yes / No If so, how many? _____

Did You Make Lump Sum Payment on House in Past 10 yrs? Yes / No Amount? _____

Name of first lien holder: _____

Payoff balance \$ _____ Present estimated value of property \$ _____ Tax Assessor's Value \$ _____

Name of second lien holder on property: _____

2nd lien balance \$ _____ Do you owe taxes or homeowner's association dues on property? YES / NO

If so, how much? _____

1.b. **Do You Own Other Land, Houses or Real Estate?** YES/NO Property address: _____

Date of purchase: _____ Are you delinquent in payments? YES/NO If so, how many? _____

Name of first lien holder: _____

Payoff balance \$ _____ Present estimated value of property \$ _____ Tax Assessor's Value \$ _____

Name of second lien holder on property: _____

2nd lien balance \$ _____ Do you owe taxes or homeowner's association dues on property? YES / NO

Do you own any additional land, houses, or real estate? YES/NO If so, provide information requested for each parcel on an additional sheet and attach to this questionnaire.

1. **Cash** on hand: Amount of money in your pocket/purse, at home & everywhere else: \$ _____

2. **Checking or savings accounts**, money market or share accounts, certificates of deposits or security deposits:

a. Name of bank, credit union or utility: _____

Current balance: \$ _____ Type of account: _____

b. Name of bank, credit union or utility: _____

Current balance: \$ _____ Type of account: _____

c. Name of bank, credit union or utility: _____

Current balance: \$ _____ Type of account: _____

3. **Do you have more than three accounts?** YES/NO If yes, please provide the information requested for each account on an additional sheet.

4. **Do you have personal property of GREAT VALUE (more than \$450 each item)**, such as antiques, art, coin, stamp or gun collections? YES/NO (circle one)

Describe: _____

5. **DESCRIBE YOUR VEHICLES:** (if more than 4, list on additional sheet)

a. Year, Make, Model: _____ Mileage: _____

Lien holder: _____ Monthly payment \$ _____ # payments behind: _____

Total balance due\$ _____ Value\$ _____ Date purchased: _____

b. Year, Make, Model: _____ Mileage: _____

Lien holder: _____ Monthly payment \$ _____ # payments behind: _____

Total balance due\$ _____ Value\$ _____ Date purchased: _____

c. Year, Make, Model: _____ Mileage: _____

Lien holder: _____ Monthly payment \$ _____ # payments behind: _____

Total balance due\$ _____ Value\$ _____ Date purchased: _____

d. Year, Make, Model: _____ Mileage: _____

Lien holder: _____ Monthly payment \$ _____ # payments behind: _____

Total balance due\$ _____ Value\$ _____ Date purchased: _____

e. **Do you own a MOBILE HOME, BOAT OR RECREATIONAL VEHICLE? YES/NO**

Describe: _____

Year, Make, Model: _____

Lien holder: _____ Monthly payment \$ _____ # payments behind: _____

f. **Do you own any STOCKS OR BONDS** that are NOT in a retirement plan or 401(k) plan? YES/NO

Describe: _____

g. **Do you have a RETIREMENT PLAN, PROFIT SHARING PLAN OR IRA? YES/NO.**

Describe: _____

h. Does **ANYONE** owe you any money? YES/NO Describe: _____

i. **Have you FILED ALL TAX RETURNS? YES/NO** Which Years Not Filed?: _____

j. Do you **OWE TAXES?** How much and for which tax years? _____

k. Are you due a **TAX REFUND?** YES/NO How Much & Which Year? _____

l. Do you have **ANY CLAIMS AGAINST ANYONE**, including claims from an auto accident, or lawsuits pending against anyone? YES/NO

Describe: _____

Are you about to **INHERIT** any money or property or receive any **LIFE INSURANCE PROCEEDS** from anyone's death? YES/NO

Describe: _____

m. Do you **OWN (or have you owned) A BUSINESS**, or any part of a business in the past two years?
YES / NO

State Name of Business and Nature of Business: _____

When Did Business Start (& Stop if applicable): _____

n. State the **TYPE OF BUSINESS**: Sole Proprietor (dba) Partnership Corporation LLC LLP

o. **DESCRIBE ALL ASSETS AND PROPERTY OWNED BY BUSINESS** and Estimated Value: (use additional page if necessary, include bank accounts, accounts receivable, inventory, machinery, vehicles, tools, equipment, every kind of property.)

p. **STATE WHETHER OR NOT YOU OWN ANY OF THE FOLLOWING TYPES OF PROPERTY- CIRCLE "YES" OR "NO"**

FOR EACH "YES" ANSWER, BRING THE PAPERWORK (IF ANY) DESCRIBING THE PROPERTY, OR DESCRIBE FULLY BELOW OR ON SEPARATE SHEET.

- Yes/No (9) "Cash value" life insurance policies (the kind you can cash in or borrow against)
- Yes/No (10) Annuities
- Yes/No (12) Stock of interests in incorporated or unincorporated entities
- Yes/No (13) Interests in partnerships or joint ventures
- Yes/No (14) Government bonds, savings bonds, corporate bonds, or other instruments
- Yes/No (15) Accounts receivables
- Yes/No (16) Alimony, Support, or Marital Property Settlements
- Yes/No (17) Debts owed to you
- Yes/No (18) Equitable or Future interests, Life estates, and Rights or powers for your benefit
- Yes/No (19) Interests in an inheritance of life insurance policy, death benefit plan or trust
- Yes/No (20) Other contingent and unliquidated debts owed to you
- Yes/No (21) Patents, copyrights, or other intellectual property, web site or domain name
- Yes/No (22) Licenses, franchises, or other general intangibles
- Yes/No (25) Aircraft and accessories
- Yes/No (26) Office Equipment, office furnishings, or office supplies (need detailed list)
- Yes/No (27) Machinery, fixtures, equipment, or supplies used in business (need detailed list)
- Yes/No (28) Inventory
- Yes/No (29) Animals
- Yes/No (30) Crops (growing and harvested)
- Yes/No (31) Farming equipment or implements
- Yes/No (32) Farm supplies, chemicals and feed
- Yes/No (33) Other property of value of more than \$100 not already listed
- Yes/No (34) Are you entitled to recover damages for injury to person or property from auto collision, worker's comp., or other claim?

Comments/explanations of above answers: _____

HOUSEHOLD GOODS, PERSONAL EFFECTS, AND OTHER PROPERTY

Complete this form by stating the number of each of the items you own in the blank provided, and the market value, the amount of money that you would pay to buy them, if you were buying them USED, IN THE CONDITION THAT THEY ARE NOW.

If you don't own any of the items, leave blank. Write in other items you own under "other." **YOU MUST LIST EVERYTHING YOU OWN, ATTACH ADDITIONAL SHEETS IF NECESSARY.**

Value the items as though you were purchasing them used, as at a Salvation Army or Goodwill store. Do not use purchase price or insurance value, unless it is in fact what you could purchase it for, used.

<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Living Room</th> <th style="text-align: center;"># of items</th> <th style="text-align: center;">Market Value</th> </tr> </thead> <tbody> <tr><td>Sofa _____</td><td></td><td></td></tr> <tr><td>Sectional Sofa _____</td><td></td><td></td></tr> <tr><td>Recliner _____</td><td></td><td></td></tr> <tr><td>Love Seat _____</td><td></td><td></td></tr> <tr><td>Side Chair _____</td><td></td><td></td></tr> <tr><td>Rocking Chair _____</td><td></td><td></td></tr> <tr><td>Coffee Table _____</td><td></td><td></td></tr> <tr><td>End Table _____</td><td></td><td></td></tr> <tr><td>Bookcase _____</td><td></td><td></td></tr> <tr><td>Lamps _____</td><td></td><td></td></tr> <tr><td>TV _____</td><td></td><td></td></tr> <tr><td>VCR _____</td><td></td><td></td></tr> <tr><td>Stereo _____</td><td></td><td></td></tr> <tr><td>Stereo Cabinet _____</td><td></td><td></td></tr> <tr><td>DVD Player _____</td><td></td><td></td></tr> <tr><td>Computer, Printer _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> </tbody> </table>	Living Room	# of items	Market Value	Sofa _____			Sectional Sofa _____			Recliner _____			Love Seat _____			Side Chair _____			Rocking Chair _____			Coffee Table _____			End Table _____			Bookcase _____			Lamps _____			TV _____			VCR _____			Stereo _____			Stereo Cabinet _____			DVD Player _____			Computer, Printer _____			Other (describe) _____			Other (describe) _____			<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Kitchen/Dining</th> <th style="text-align: center;"># of items</th> <th style="text-align: center;">Market Value</th> </tr> </thead> <tbody> <tr><td>Stove _____</td><td></td><td></td></tr> <tr><td>Refrigerator _____</td><td></td><td></td></tr> <tr><td>Dishwasher _____</td><td></td><td></td></tr> <tr><td>Trash Compactor _____</td><td></td><td></td></tr> <tr><td>Small Appliances _____</td><td></td><td></td></tr> <tr><td>Pots and Pans _____</td><td></td><td></td></tr> <tr><td>Dishes and Glassware _____</td><td></td><td></td></tr> <tr><td>Sterling ware _____</td><td></td><td></td></tr> <tr><td>Flatware _____</td><td></td><td></td></tr> <tr><td>Table and Chairs _____</td><td></td><td></td></tr> <tr><td>China _____</td><td></td><td></td></tr> <tr><td>China cabinet _____</td><td></td><td></td></tr> <tr><td>Buffet _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> <tr><td>Other (describe) _____</td><td></td><td></td></tr> </tbody> </table>	Kitchen/Dining	# of items	Market Value	Stove _____			Refrigerator _____			Dishwasher _____			Trash Compactor _____			Small Appliances _____			Pots and Pans _____			Dishes and Glassware _____			Sterling ware _____			Flatware _____			Table and Chairs _____			China _____			China cabinet _____			Buffet _____			Other (describe) _____			Other (describe) _____			Other (describe) _____			Other (describe) _____			Other (describe) _____		
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Freezer _____																																																																																																																			
Garden Tools _____																																																																																																																			
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<p>Bathroom One Market Value</p> <p>Towels and linens _____</p> <p>Toilette articles _____</p> <p>Other _____</p> <p>Other _____</p> <p>Other _____</p>	<p>Bathroom Two Market Value</p> <p>Towels and linens _____</p> <p>Toilette articles _____</p> <p>Other _____</p> <p>Other _____</p> <p>Other _____</p>
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<p>Jewelry Husband # of Items Market Value</p> <p>Watch _____</p> <p>Watch _____</p> <p>Wedding Band _____</p> <p>All Other Rings _____</p> <p>Bracelets _____</p> <p>Other (describe) _____</p> <p>Other (describe) _____</p>	<p>Jewelry Wife # of Items Market Value</p> <p>Watch _____</p> <p>Watch _____</p> <p>Wedding Band _____</p> <p>All Other Rings _____</p> <p>Bracelets _____</p> <p>Other (describe) _____</p> <p>Other (describe) _____</p>
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<p>Clothing and Shoes: Market Value</p> <p>Husband _____</p> <p>Wife _____</p>	<p>Security Deposits With Landlords, Others:</p> <table style="width:100%; border:none;"> <tr> <td style="width:70%;">Name</td> <td style="width:30%;">Amount</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>	Name	Amount	_____	_____	_____	_____
Name	Amount						
_____	_____						
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<p>Guns:</p> <table style="width:100%; border:none;"> <tr> <td style="width:30%;">Description</td> <td style="width:40%;"></td> <td style="width:30%;">Market value</td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> </table> <p>Collections:</p> <table style="width:100%; border:none;"> <tr> <td style="width:30%;">Description</td> <td style="width:40%;"></td> <td style="width:30%;">Market value</td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> <tr> <td>_____</td> <td></td> <td></td> </tr> </table>	Description		Market value	_____			_____			_____			Description		Market value	_____			_____			_____			<p>Pictures and art objects:</p> <table style="width:100%; border:none;"> <tr> <td style="width:30%;">Description</td> <td style="width:70%;">Market value</td> </tr> <tr> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td></td> </tr> </table> <p>Sports equipment:</p> <table style="width:100%; border:none;"> <tr> <td style="width:30%;">Description</td> <td style="width:70%;">Market value</td> </tr> <tr> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td></td> </tr> </table>	Description	Market value	_____		_____		_____		Description	Market value	_____		_____		_____	
Description		Market value																																							

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Description	Market value																																								

Please indicate which household goods and personal effect have money owed against them or have been used as collateral. Also indicate which creditor holds such a lien against your property.



Statement of Financial Affairs

	Debtor	Spouse
1a. WHAT IS YOUR TOTAL (GROSS) INCOME FROM EMPLOYMENT OR BUSINESS THIS YEAR TO-DATE?	\$ _____	\$ _____
YOUR INCOME LAST YEAR FROM EMPLOYMENT OR BUSINESS	\$ _____	\$ _____
YOUR INCOME YEAR BEFORE LAST FROM EMPLOYMENT OR BUSINESS	\$ _____	\$ _____

1b. OTHER INCOME RECEIVED DURING LAST TWO YEARS
examples: Interest, rents, royalties, inheritance, Social Security, gambling winnings, child support, unemployment, Worker's comp, lawsuit settlements, sales of property, etc.

Year Received	Source		
_____		\$ _____	\$ _____
_____		\$ _____	\$ _____
_____		\$ _____	\$ _____
_____		\$ _____	\$ _____

2. LIST ALL PAYMENTS TOTALING MORE THAN \$600 TO A SINGLE CREDITOR IN THE PAST 60 DAYS (NOT INCLUDING ORDINARY MONTHLY PAYMENTS)

Name and Address	Amount Paid/Date	Balance Due

3. LIST ALL PAYMENTS TO RELATIVES ON A LOAN OR DEBT IN THE PAST 12 MONTHS

Name and Address	Relationship to You	Amount Paid	Balance Due

4. LIST ALL LAW SUITS, GARNISHMENTS AND ATTACHMENTS TO WHICH YOU WERE A PARTY TO IN THE LAST YEAR:

Court & Case Number	Court and Location	Status

5. LIST ALL REPOSSESSIONS AND RETURNS TO SELLERS WITHIN THE LAST YEAR

Name and address of creditor	Description of property returned	Value of property

\$ _____

\$ _____

6. LIST ALL PROPERTY BEING HELD BY A RECEIVER OR COURT-APPOINTED OFFICER.

Name and address of Receiver Description of Property Court and Case Number

7a. LIST ALL GIFTS WITHIN THE PAST TWELVE MONTHS TO (a) FAMILY MEMBERS TOTALING MORE THAN \$200 PER FAMILY MEMBER and (b) CHURCHES OR CHARITIES TOTALING MORE THAN \$100 PER CHURCH OR CHARITY.

Name/Address of Transferee Relationship to You Date of Gift Description & Value of Gift

8. LIST ALL LOSSES DUE TO FIRE, THEFT, OTHER CASUALTY LOSS OR GAMBLING WITHIN THE LAST YEAR.

Description of property Value of Property Date of loss

9. LIST ALL PAYMENTS TO ATTORNEYS OR ANYONE, WITHIN THE PAST TWELVE MONTHS, FOR DEBT COUNSELING, FORECLOSURE ASSISTANCE OR BANKRUPTCY SERVICES (not including J. Thomas Black).

Payee Name/Address Date of Payment Amount Paid

10a. LIST ALL TRANSFERS AND SALES OF PROPERTY IN THE PAST TWELVE MONTHS (INCLUDING CARS, HOUSES, STOCKS OR BONDS, BUSINESSES, ANY PROPERTY)

10b. IF YOU HAVE GIVEN ANYONE A LIEN OR MORTGAGE ON ANY OF YOUR PROPERTY IN THE PAST TWELVE MONTHS, GIVE DETAILS

Name/Address of Transferee Relationship to You Date of Lien Description of Lien

11. LIST ALL BANK ACCOUNTS OR FINANCIAL ACCOUNTS YOU HAVE CLOSED WITHIN THE LAST 12 MONTHS (include checking and savings, brokerage or mutual fund accounts, etc.)

Name and address of financial institution	Account No.	Closing Balance	Closing Date
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

\$

12. LIST EACH SAFE DEPOSIT BOX IN WHICH YOU HAVE HAD SECURITIES (STOCKS or BONDS), CASH, OR OTHER VALUABLES IN THE PAST TWELVE MONTHS:

Name/Address of Bank	Names of Those with Access	Describe Contents	Date of Surrender
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13. LIST ANY MONEY OR PROPERTY THAT HAS BEEN SETOFF IN THE PAST 12 MONTHS
(examples: you default on a bank loan, bank takes money out of your account)

14. LIST ALL PROPERTY OWNED BY ANOTHER PERSON THAT YOU HOLD OR CONTROL.(provide name of owner and describe property holding or controlling)

15. LIST ALL ADDRESSES FOR THE PAST TWO YEARS AND THE DATES OF RESIDENCE.

Former Address	Name Used	Dates of Occupancy
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16. LIST ALL CURRENT OR FORMER SPOUSES FOR THE PAST 6 YEARS (THAT HAVE LIVED WITH YOU IN TEXAS OR ANOTHER COMMUNITY PROPERTY STATE)

example: Jane Smith, current spouse example: Edward Vaughn, former spouse divorced 12-15-2002

17a ENVIRONMENTAL QUESTIONS. List the name and address of every site for which you have received notice in writing by a governmental unit that you may be liable under an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law (attach additional sheets if necessary):

17b. List the name and address of every site for which the debtor 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.

17c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

17d. DO YOU OWN OR POSSESS ANY DANGEROUS PROPERTY? (explosives, radioactive materials, hazardous waste, anthrax?) YES/NO
If yes, describe:

Do you own or possess any property, either land or personal property, that to the best of your knowledge poses or is alleged to pose, an imminent and identifiable threat of harm to the public health or safety? YES/NO.

If yes, describe: _____

17e. If you answered yes to the question above, describe the property, the nature and location of the dangerous condition, and whether it is environmental or otherwise.

18a. IF YOU HAVE BEEN AN OFFICER, DIRECTOR, PARTNER, 5% OR MORE OWNER, OR MANAGING EXECUTIVE OF A CORPORATION OR PARTNERSHIP IN THE PAST TWO YEARS, GIVE DETAILS.

18b. IF YOU HAVE BEEN A SOLE PROPRIETOR OR SELF-EMPLOYED IN THE PAST TWO YEARS, GIVE DETAILS.

19a. LIST ALL BOOKKEEPERS AND ACCOUNTANTS WHO KEPT YOUR BOOKS (OR SUPERVISED THE KEEPING OF YOUR BOOKS) IN THE PAST 2 YEARS.

19b. LIST ALL FIRMS OR INDIVIDUALS WHO AUDITED YOUR BOOKS AND RECORDS, OR PREPARED A FINANCIAL STATEMENT OF YOURS.

19c. LIST ALL FIRMS OR INDIVIDUALS WHO ARE IN POSSESSION OF YOUR BOOKS OF ACCOUNT AND RECORDS AS OF THE FILING OF THIS BANKRUPTCY CASE.

19d. LIST ALL FINANCIAL INSTITUTIONS, CREDITORS AND OTHER PARTIES, TO WHOM YOU HAVE GIVEN A FINANCIAL STATEMENT IN THE PAST 2 YEARS.

20a. (FOR BUSINESSES) LIST THE DATES OF THE LAST 2 INVENTORIES OF YOUR PROPERTY, THE NAME OF THE PERSON SUPERVISING THE TAKING THE INVENTORY, AND THE DOLLAR AMOUNT OF EACH INVENTORY.

20b. (FOR BUSINESSES) LIST THE NAME AND ADDRESS OF THE PERSON HAVING POSSESSION OF THE RECORDS OF EACH OF THE INVENTORIES, ABOVE.

WHAT CAUSED YOU TO GET INTO FINANCIAL DIFFICULTY?

21. CHECK ALL OF THE FOLLOWING CAUSES OF BANKRUPTCY THAT APPLY TO YOU.

- | | | | |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Overspending | <input type="checkbox"/> Foreclosure | <input type="checkbox"/> Loss of overtime | <input type="checkbox"/> Repossession |
| <input type="checkbox"/> Business failure | <input type="checkbox"/> Medical problems | <input type="checkbox"/> Substance abuse | <input type="checkbox"/> Taxes |
| <input type="checkbox"/> Gambling | <input type="checkbox"/> Retirement | <input type="checkbox"/> Harassment | <input type="checkbox"/> Disability |
| <input type="checkbox"/> Divorce | <input type="checkbox"/> Medical bills | <input type="checkbox"/> Loss of job | <input type="checkbox"/> Lawsuit |

22. Were there any creditors or bill collectors that harassed you or caused you to file bankruptcy? If so, give details below or on a separate sheet.

23. THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE!

IT IS YOUR RESPONSIBILITY TO BE SURE THAT ALL OF YOUR CREDITORS ARE LISTED ON THE FINAL "SCHEDULES" THAT ARE FILED WITH THE BANKRUPTCY COURT. YOU MAY LIST YOUR CREDITORS BELOW- OR BRING YOUR LATEST STATEMENTS OR BILLS FOR US TO REVIEW. WE WILL OBTAIN YOUR CREDIT REPORT AND USE IT TO "DOUBLE-CHECK." NOT ALL CREDITORS ARE LISTED ON CREDIT REPORTS.

Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	

Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	
Name		Name	
Account #		Account #	
Address		Address	
Amt. Owed	What was purchased?	Amt. Owed	What was purchased?
Date purchased or Date debt incurred		Date purchased or Date debt incurred	