

“The hardest part of the Bankruptcy process should be walking through my door.”
– F.W.H.

BANKRUPTCY QUESTIONNAIRE

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BANKRUPTCY CHECKLIST	COMPLETED
A Credit Report obtained from www.annualcreditreport.com	
Your last 2 Years Tax Returns.	
Your last 6 Months Paystubs (up to your date-of-filing).	
Complete your Credit Counseling Course Access Counseling: www.accesscounselinginc.org Attorney Code: fran2948 District: Northern District of Iowa	

- Electronic records are welcome! Please feel free to email any of the information we need.

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PERSONAL INFORMATION

Debtor 1

Full Legal Name:

List any other names you have used in the last 8 years, including maiden names, aliases, or business names:

Social Security Number:

Date of Birth:

Address:

Street City State Zip

County

***If you have not lived at the above address for 3 years, please list where you lived before this address. Include the dates in which you resided there.**

Example: 123 Main St., Dubuque, IA 52001. From April 2012 to May 2014.

Debtor 2

Full Legal Name:

List any other names you have used in the last 8 years, including maiden names, aliases, or business names:

Social Security Number:

Date of Birth:

Address (if residing somewhere other than the Debtor 1's address):

Street City State Zip

County

***If you have not lived at this address for 3 years, please list where you lived before this address. Include the dates in which you resided there.**

Example: 123 Main St., Dubuque, IA 52001. From April 2012 to May 2014.

Has either Debtor 1 or Debtor 2 filed any other bankruptcies?

City/State Filed	Case Number	Date Filed	Chapter 7 or 13
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City/State Filed	Case Number	Date Filed	Chapter 7 or 13
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1. ASSETS

List the following information regarding your assets. In each category, describe each item. Married couples are equally responsible for supplying correct information. Be as complete and accurate as possible. Only list each asset once.

REAL ESTATE

List all real estate that you have any legal or equitable interest in like your residence/home, a building, or any land.

Property Address	Value
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Property Address	Value
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Property Address	Value
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If you are buying real estate by agreement for deed, provide the following and bring a copy of your contract.

VEHICLES-cars, vans, trucks, tractors, sport utility vehicles, motorcycles

Year	Make	Model	Approx. Mileage	Lien Holder	Value
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Year	Make	Model	Approx. Mileage	Lien Holder	Value
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Year	Make	Model	Approx. Mileage	Lien Holder	Value
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RECREATIONAL-boats, motor homes, ATV's, trailers

Year	Make	Model	Approx. Mileage	Lien Holder	Value
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Year	Make	Model	Approx. Mileage	Lien Holder	Value
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FINANCIAL ASSETS

Cash on hand: _____

Deposits of Money:

(Checking, savings, certificates of deposits, shares in credit unions, brokerage houses, etc.)

Name of Institution	City/State Location of Institution	Type of Account
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Name of Institution	City/State Location of Institution	Type of Account
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Name of Institution	City/State Location of Institution	Type of Account
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Retirement or Pension Accounts:

(Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit sharing plans.)

Institution Name	Type of Account	Value
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Institution Name	Type of Account	Value
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Institution Name	Type of Account	Value
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Security Deposits with landlords, utility companies, or prepaid rent:

Name of Agency or Person	Amount
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Interests in Insurance Policies:

Company Name	Beneficiary	Surrender or Refund Value
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Company Name	Beneficiary	Surrender or Refund Value
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Company Name	Beneficiary	Surrender or Refund Value
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ADDITIONAL FINANCIAL ASSETS

Bonds, mutual funds, or publically traded stocks:

Institution of issuer name	Value
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Non-publically traded stock and interest in incorporated or unincorporated businesses, including an interest in an LLC, partnership, and joint venture:

Name of Entity	Percentage of Ownership
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Personal Checks, Cashier's Checks, Promissory Notes, Money Orders, Government Bonds:

Issuer Name	Amount
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Annuities:

Issuer Name and Description	Value
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Trusts:

Patents, Copyrights, Trademarks, Trade Secrets:

Licenses, Franchises:

Tax Refunds owed to you:

Family Support owed to you:

Interests in Property from someone who has died:

Claims against third parties (accidents, employment disputes, insurance claims, and rights to sue):

Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims:

Any Financial Assets you did not already list:

PERSONAL AND HOUSEHOLD ITEMS

For each category, please enter a brief description and value. The value is not what you paid for an item or what it would cost for you to replace the item, the value is what you could sell the item for at a garage sale today.

Household Goods and Furnishings:

Major appliances, furniture, linens, china, kitchenware

Total Value

Electronics:

TV's, stereo, computer equipment, devices, media players, cameras

Total Value

Collections of value:

Antiques, paintings, prints, artworks, books, pictures, portraits, collections

Total Value

Equipment for sports/hobbies:

Exercise, photographic, bicycles, pool tables, golf clubs, kayaks, canoes, instruments

Total Value

Firearms:

Pistols, rifles, shotguns, ammunition

Total Value

Clothes:

Wardrobe, furs, shoes, accessories

Jewelry:

Costume jewelry, engagement rings, wedding rings, heirloom pieces, watches, gems, gold, and silver

Non-farm animals:

Dogs, cats, birds, horses

Any other items you did not list:

Do you have a safety deposit box or a safe in your home?

Location

Contents

Who has access to it?

2. LAST 12 MONTHS

The Bankruptcy Court needs to know whether or not certain situations apply to your case. Please read the following questions and answer accordingly.

- Party to any lawsuits:** YES NO
(if yes, bring related documents)
- Vehicles voluntarily surrendered or repossessed:** YES NO
(if yes, bring related documents)
- Any vehicles, personal property, or real estate sold/transferred:** YES NO
(if yes, bring related documents)
- Closed any bank accounts:** YES NO
(if yes, bring related documents)
- Closed/Cashed any Insurance/IRA/401k:** YES NO
(if yes, bring related documents)
- Any loss from Gambling/theft/fire/auto accident:** YES NO
(if yes, list below)

Description/Value

Description/Value

3. CREDITOR PAYMENTS

List all payments made greater than \$600 within the past 90 days:
(Use Bank Statements as Reference)

Payee/Address	Date	Amount
Payee/Address	Date	Amount
Payee/Address	Date	Amount
Payee/Address	Date	Amount
Payee/Address	Date	Amount

4. EXPENSES

Please list your approximate monthly expenses. If some expenses are deducted from your paycheck, like your health insurance, you do not need to list those amounts. If you have expenses outside of the categories listed, please make notations on the back.

Do you have any dependents? List their relationship to you, their age, and if they reside with you.

1. Rent or Mortgage Payment: \$

2. Electricity, heat, natural gas: \$

3. Water, sewer, garbage collection: \$

4. Telephone, cell phone, Internet, satellite, and cable services: \$

5. Childcare and children's education costs: \$

6. Medical and dental expenses: \$

7. Life Insurance: \$

8. Health Insurance: \$

9. Vehicle Insurance: \$

10. Taxes: \$

11. Auto Loans/Leases: \$

12. Child Support: \$

13. Educational Loan Repayments: \$

Unsecured Debt

(credit cards, medical, personal loan, payday loan, etc)

<u>1: CREDITOR'S INFO.</u> *Full Name/Business *Mailing Address *Phone/Fax Number	<u>2: ACCOUNT INFO.</u> *Account Number *Date of Debt/Loan	<u>3: DESCRIPTION</u> *Credit Card *Medical *Payday Loans *Personal Loans	<u>4: AMOUNT OWED</u> *Based on most recent account statement

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