MASSACHUSETTS LABORERS' LEGAL SERVICES FUND

1400 District Avenue • Suite 100 • Burlington, MA 01803-5236
Tel: (781) 273-3939 • Fax: (781) 273-1133 • Toll Free 1-800-852-3000

DATE

Re: New Bankruptcy Case No. (BR)

Ouestionnaire & Document List

Dear,

As we discussed, enclosed please find the office questionnaire that we use to gather necessary information for a potential bankruptcy filing. It includes a list of documents that are required to process a case.

Please fill in as much of the questionnaire as you can and gather documents from the list. Once you've done that, please call or e-mail me to schedule an appointment to review them, answer questions and pull a credit report.

Thank you for your attention to this matter.

Very truly yours,

/s/ Michael J. Riley

Michael J. Riley Attorney, Burlington Office mriley@mllsf.org

MJR/km encl.

CHAPTER 7 BANKRUPTCY QUESTIONNAIRE

Massachusetts Laborers' Legal Services Fund 1400 District Avenue, Suite 100, Burlington, MA 01803 Ph: 781.273.3939 – mriley@mllsf.org

This confidential questionnaire contains a list of questions and documents necessary to prepare for your office appointment on:

T.B.D.

This form is for our office use only – it is NOT submitted to the court and does NOT have to be perfect.

We will prepare a "bankruptcy petition" with the information you provide. That document will be filed with the Bankruptcy Court only after you have reviewed it with an attorney and signed it.

DIRECTIONS:

- \circ ALL spaces MUST be filled in. If an item does not apply to your situation, write "none" or " \emptyset " in that space.
- o <u>If you are unsure whether or not to include certain information or documentation, please provide it and we will</u> determine if it is necessary it usually is.

1. YOUR NAME:					Soc. Sec. 1	No.				
	Home address:									
			(Street Number and Name)		(Apt#)		(City)	(S	tate ar	nd Zip Code)
	How long at this	address?								
Ī	Mailing address:	(if different)								
			(Street Number and Name)		(Apt#)		(City) (State and Zip Code		nd Zip Code)	
	E-mail:				Cell No.					
ŀ	If <u>less</u> than three (3) years at current address, list prior address(es) and approximate dates of residence:									
	Home Address:						From		То	
	Home Address:						From		То	
	Occupation		Em	oloyer:						
	Employer's Add									
	How long have you worked for this employer? (# of month			hs/years) (State and Zip Code)						
	Are you married? Yes / No (circle one)									
2. SPOUSE NAME:			Soc. Sec. I	No.						
	Address (if different)			Date of M	te of Marriage					
	Age Tel. No.		E-mail add	dress:						
	Occupation Employer									
	Employer's Address									
	How long have you worked for this employer? (# of months/years) (State and Zip Control of the c				e and Zip Code)					
3. Other than spouse listed above, please list <u>all people living in your household:</u>										
	FULL NAME			Relation	Date of Birth		.m			
-										
ŀ										
L										

4.	REAL ESTATE	
	**Note: If you intend to keep	your home, you MUST resume and/or continue making mortgage payments and remain current
_		
For an	y property you now own or n	ave owned in the past 10 years (including timeshares), please complete the following:
a-1)	Address:	
ω <u>-</u> ,	Names of other owners:	
	riames or other owners.	
a-2)	Address:	
- ,	Names of other owners:	
5. ASS	ETS / PERSONAL PROPERTY	
		ep certain items of property if the value does not exceed legal limits—such property is considered
	pt". Most people keep <u>all</u> pro	
>		rket value and give a brief description of the following items. Fair Market Value is the amount
		e item(s) today, NOT the cost when they were purchased. Remember that most items are "used" ch as when new - think yard sale or Craigslist.
	•	paperwork. If you do not own a particular item, write "None" or "Ø"
	detail before illianzing your	paper month in you do <u>not</u> own a particular item, write mone or p
	ITEM	DESCRIPTION / VALUE
(Exam	ple) Jewelry	(Example) diamond engagement ring: \$2,000.00; wedding bands: \$1,200.00
(Exam	ple) Clothing	(Example) personal and family clothing: \$500.00
Cash o	n hand	
Bank A	Accounts - list for each: Bank	1.
name / type of account/		2.
approximate current balance		
		3.
Clothing – one \$ figure for all		
clothing		
Jewelry		
Household Furnishings and		
appliances		
Electronics (TVs, computers, cell		

phones, etc.) Guns, sports equipment, etc. Security deposits Stocks, bonds, retirement other than Union Pension & Annuity Term or Whole life? Beneficiary **Life Insurance policies** Cash value, if any? Beneficiary Name: DOB: Collections: art, stamps, etc. Animals (include all pets) Interests in trusts Tools and yard equipment **Business interests Income tax refund** – if you have not yet received refund(s) for last year, please state the amount that you expect to receive from both federal \$_ and state: \$_

MOTOR VEHICLES (include motorcycles, boats, trailers and recreational vehicles): IMPORTANT: If you are paying on a loan or lease for any vehicle(s) you MUST continue making regular payments if you intend to keep the vehicle(s). **VEHICLE #1** YEAR/MAKE/MODEL: Trim level: (example: GL, GS, XL): VIN# Plate # Condition: (good, avg, poor): 4WD? Yes / No # of doors: Approximate mileage: Is there a loan or lease on the vehicle? If so, who is lender (or lessor)? How much is the monthly payment? Are you current on payments? YES / NO Approximate balance remaining on loan? Important: Whose name is on the registration? Do you want to keep this vehicle? YES / NO **VEHICLE #2** YEAR/MAKE/MODEL: Trim level: (example: GL, GS, XL): VIN# Plate # Condition: (good, avg, poor): 4WD? Yes / No # of doors: Approximate mileage: Is there a loan or lease on the vehicle? If so, who is lender (or lessor)? How much is the monthly payment? Are you current on payments? YES / NO Approximate balance remaining on loan? Important: Whose name is on the registration? Do you want to keep this vehicle? YES / NO RECREATIONAL VEHICLE/ TRAILER/ BOAT/MOTORCYCLE Year/Make/model: VIN# Plate # Purchase date and price: Condition: (good, avg, poor): Approximate mileage: Is there a loan on the vehicle? YES / NO If so, who is lender?: YES / NO Are you current on payments? Approximate balance remaining on loan? Do you want to keep this vehicle? YES / NO

If more vehicles, list here or on back of page.

6.

7. MONTHLY EXPENSES—

- For mortgages, car payments, and other fixed expenses, use <u>exact</u> figures.
- > For food and utilities, estimate average monthly expense.
- ➤ The Bankruptcy Court counts 4.3 weeks in a month → multiply "weekly" expenses by 4.3.
- ➤ We will review and discuss figures before filing with the court.

Mortgage <i>OR</i> Rent	\$ Transportation (gas, maintenance, repairs, public transportation – NOT car payments)	\$
2 nd mortgage or Equity line	\$ Recreation/entertainment (including newspapers, magazines, lottery, movies, etc.)	\$
Property Tax	Charity and religious donations	\$
(if <u>not</u> included in mortgage)	\$ (if regular expense)	
Homeowner's/Tenant Insurance- if <u>not</u> included in mortgage/rent	\$ Life Insurance	\$
Maintenance and Repair	\$ Health Insurance	\$
Heat and Electricity	\$ Vehicle insurance	\$
	Student Loans	\$
Water/Sewer	\$ Taxes (that are not deducted from	\$
Garbage collection	\$ paychecks) (example: vehicle excise or IRS)	
Home telephone	\$ Vehicle Loan / Lease Payment #1	\$
Cellular telephone(s)/internet/cable TV	\$ Vehicle Loan / Lease Payment #2	\$
Food/ household supplies	\$ Other installment or lease payments	\$
Child Care/day care and education	\$ Court-ordered Child support or alimony	\$
Clothing, Laundry and Dry Cleaning	\$ Support for others that do NOT live with you	\$
Personal care products & services	\$ Child activity expenses (field trips, sports, etc.)	\$
Uninsured Medical (deductibles, copays, etc.)	\$ Union book	\$
Uninsured Dental	\$ Pet expenses (food, veterinary, grooming):	\$
	\$ Cigarettes:	\$
	\$ Other (describe):	\$
	\$	\$

8. FINANCIAL AFFAIRS – We can go over these at your appointment	YES or NO	If YES, please describe:
Have you ever filed for Bankruptcy before?	YES / NO	If yes, when?
If you are court-ordered to pay child support, are you current on this	YES / NO	Weekly order:
obligation?		Arrearage amount, if any:
Have you filed all past state and federal income tax returns?	YES / NO	
Have any creditors put liens or attachments on your property?	YES / NO	
Does anyone owe you money?	YES / NO	If yes, who and why?
Is there anyone you might have the right to sue, such as for a personal injury?	YES / NO	
When did you last use a credit card?		
Have you made payments totaling more than \$600 to any one creditor		
within the past 90 days other than mortgage/rent or car payment?	YES / NO	
(Amount/name of creditor)	1237 110	
Do you have a safe deposit box?	YES / NO	
Do you have a storage unit or locker?	YES / NO	
Have you made or received any gifts in excess of \$300 in the past twelve		
months? (Identify gift/value and donor)	YES / NO	
Are you currently being sued by anyone or do you owe a money	VEC / NO	If yes, provide any related documents
judgment as a result of a lawsuit?	YES / NO	
Have you received or do you expect that you might inherit any money or property or receive a life insurance payout in the next 6 – 12 months?	YES / NO	
(* IF you do become entitled to an inheritance/payout within 6 months		
after filing bankruptcy, you must report that to your attorney.) Do you owe any back taxes, whether federal or state income taxes, or		
town or city property taxes?	YES / NO	
Have you closed any bank accounts in the past 24 months?	_	
(bank name / date closed/\$ balance at closing)	YES / NO	
Have you suffered any loss due to gambling, fire or theft in past 2 years?		
(\$ amount, cause, date(s)	YES / NO	
Have you received any insurance settlements in the past 2 years?	VEC / NO	
(amount, date, source)	YES / NO	
Do you have expenses for the care and support of an elderly, chronically		
ill, or disabled member of your household or immediate family member who is unable to pay such expenses?	YES / NO	
Have you or your spouse ever been convicted of a felony?	YES / NO	
	,	
Have you co-signed a loan for someone other than your current spouse? Who/when/\$ amount/name of lender?	YES / NO	□ provide a copy of statement or related document
Have you transferred (sold, given away) any personal property valued at	\/50 / · · · ·	
over \$500.00 in the last 3 years.	YES / NO	
Have you had any property repossessed or foreclosed, or wages	VEC / NO	
attached, garnished, seized, in the past 2 years? Describe:	YES / NO	
Are you the beneficiary of a trust set up by another, or have you ever	YES / NO	
set up a trust of your own?	163 / NU	
* ARE YOU ON THE DEED TO PROPERTY OWNED BY YOUR PARENTS OR	YES / NO	
ANYONE ELSE?	, -	
Does anyone in your household pay room and board or contribute to	YES / NO	
any of the household expenses?		

9. DEBTS & LIABILITIES – Money owed:

Bring bills and statements for all debts – *including*: mortgages, car loans, medical bills, personal loans (including family members), credit cards, income taxes, property taxes, <u>past due</u> utility bills (but not bills that are current), child support, student loans, and court judgments.

- Only one bill per debt is needed.
- Please open your mail before your appointment!
- Complete information is essential if complete information concerning a debt is NOT provided, it cannot be discharged in Bankruptcy you will still be legally responsible for paying it!
- ➤ Please note: the U.S. Bankruptcy Code requires that ALL debts must be listed you cannot pick and choose which debts to include!

Note – we will arrange to pull your credit report when you come for your appointment.

DOCUME	DOCUMENTS: In addition to the bills above, please bring the following to your appointment:						
•							
	* PAY STUBS: Copies of pay stubs for the past six (6) Months. (These are very important to your case.)						
	 If married, you must provide this information for your spouse even if spouse will NOT be filing bankruptcy. Also include: income from all other sources including unemployment, self-employment, workers' compensation, rental income, part-time employment, and lottery winnings, etc. 						
	TAX RETURNS: Copies of your most recent FEDERAL (not Mass.) income tax return.						
	Copies or photos of Registrations for all vehicles (including motorcycles, boats, trailers, etc.)						
	Drivers' license (or photo ID) and SS card						

CREDIT COUNSELING

<u>Certificate of Completion</u>. Before filing bankruptcy you must complete an approved credit counseling program using one of the Credit Counselors from the list below. This will take 1-2 hours and there is a small fee, typically \$20 - \$25 per person. (This does <u>NOT</u> have to be done before you schedule an office appointment or send in questionnaire and documents.

- > Upon completion you will receive a Certificate of Completion which must be provided to this office. Most providers will send the certificate directly to our office.
- > (You will also have to take a second course called a Personal Financial Management Course after your case is filed with the court.)

<u>List of approved Credit Counselors</u>. Contact one and complete the course before a petition can be filed with the Court. Give them my attorney code and they will e-mail your certificate of completion directly to our office. You can choose any provider – the course is the same. Fees are subject to change.

COUNSELOR	My Atty. Code	Est. COST -ONLINE	By Phone
		1 ST /2 nd Course	(fee is usually higher)
Pioneer (a/k/a Black Hills)	1033	\$19/20	866-210-3590
(and.pioneerCredit.com)			
Allen (ACDCS.com)	MR1114	\$20/\$20 (single or joint)	888-415-8173
Debt Helper.com	MA0511	\$24/\$14	800-920-2262 (\$50)
AccessCounseling.com	1A7241D	\$25/\$15	800-205-9297
ConsumerCredit.org	RILEY29	\$29/\$29	866-826-6924
PreBK.com	MR3939	\$14.95/\$7.95	(no phone)