

DROSE LAW FIRM

R. Michael Drose

Thomas M. Fryar*
Ann U. Bell

* Certified Bankruptcy Specialist
by S.C. Supreme Court

E-mail: michaeldrose@droselaw.com
ann@droselaw.com

DATE: _____

You are going to be meeting with a bankruptcy attorney shortly. You will not be pressured to make any decisions at this time. Our policy is to treat this meeting as one that will enable you to better understand your options.

PLEASE ANSWER THE FOLLOWING: *If unmarried, simply omit reference to your spouse.*

Your full name _____ Date of Birth ____/____/____

Your spouse's full name _____ Date of Birth ____/____/____

Do your creditors know you by another name? Yes ___ No ___ Name _____

Social Security Number _____ - _____ - _____ Names and ages of dependants: _____

Spouse's Social Security Number _____ - _____ - _____ _____

Your mailing address _____ (with zip code) _____ What county do you live in? _____

Phone numbers: **HOME** _____ (if none please indicate)

WORK (yourself) _____

WORK (spouse) _____

CELL PHONE _____

E-mail address if applicable: _____

May we send updates about your case and the law via email? **YES NO**

Have you been living in South Carolina for the past 4 years? Yes No - If not where did you live prior and dates there: (from _____ to _____):

WHERE DID YOU HEAR ABOUT US? (Please circle as many as apply)

Other Attorney

Radio

Television

Client/Friend

Yellow Pages

Newspaper

Consumer Credit Counseling

Internet

INCOME

This includes, social security, unemployment, retirement, disability and withdrawals from retirement plans or 401ks
YOUR Employment:

Place _____ Take Home Pay \$ _____ Per: wk/ 2 wks/ 2X month/ month
Gross Income: \$ _____ Per Pay Period

How long have you worked there? _____ Your position/title? _____
Do you make contributions to a retirement or 401K? Yes No If yes, how much? _____
Are contributions mandatory? Yes No Do you have any control over the amount you pay? Yes No
Do you owe any money for a loan against your 401K? Yes No If yes, how much? _____
Do you owe your Employer money? Yes No If yes, how much? _____

YOUR SPOUSE'S Employment:

Place _____ Take Home Pay \$ _____ Per: wk/ 2 wks/ 2X month/ month
Gross Income: \$ _____ Per Pay Period

How long have you worked there? _____ Your position/title? _____
Do you make contributions to a retirement or 401K? Yes No If yes, how much? _____
Are contributions mandatory? Yes No Do you have any control over the amount you pay? Yes No
Do you owe any money for a loan against your 401K? Yes No If yes, how much? _____
Do you owe your Employer money? Yes No If yes, how much? _____

Please list all other sources of income:

Military Retirement	\$ _____	Food Stamps	\$ _____
Other Retirement	\$ _____	VA Education	\$ _____
Social Security	\$ _____	Unemployment	\$ _____
Child Support and/or Alimony	\$ _____	Other income	\$ _____

Provide details of any bonuses you have gotten in the last year, or that you might receive. _____

Do you pay or owe child support? Yes No Are you current? Yes No
Do you owe any property taxes? Yes No
Has your property been sold by the county for unpaid taxes? Yes No
In the last year, have you received a notice from the tax collector that your property taxes were late? Yes No

ACCOUNT HISTORY

If you answer "yes" to any of the below questions, the attorney will discuss these with you.

Have you paid off any debts/accounts in the last year? Yes No
Have you made any payments to any creditor in the last six months, higher than \$600.00? Yes No
Have you paid off or made payments on any debts *cosigned by or for* family or friends in the last year? Yes No
Have you paid off or made payments towards any debts *owed to* family or friends in the last year? Yes No
When was the last time you used any credit card? _____ Which one(s)? _____

VEHICLES:

These questions apply if you **own** or are **paying on** a vehicle. **If you do not drive a car, leave this page blank.**

I. Are you making payments on a vehicle to any creditor who is holding title to the vehicle as security for a loan? (If car is paid for, but you took a loan against the title, the questions below apply)

VEHICLE #1

<u>Creditor</u>	<u>Year, Model</u>	<u>Monthly Payment</u>	<u>Are you Current?</u> Yes - No	<u>Day of Month Due</u>	<u>Approximate Mileage</u>
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Do you know which month and year you made the first payment? If so, please provide: _____, _____.

Loan was for _____ MONTHS.

Number of payments you think you have made: _____.

Have you had a loan extended? (circle one) **YES** (how many _____) **NO**

IF you know payoff on loan, please put here: \$ _____.

Have you given any other creditor the title to this vehicle as security for a loan?

If yes, which creditor: _____.

VEHICLE #2

<u>Creditor</u>	<u>Year, Model</u>	<u>Monthly Payment</u>	<u>Are you Current?</u> Yes-No	<u>Day of Month Due</u>	<u>Approximate Mileage</u>
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Do you know which month and year you made the first payment? If so, please provide: _____, _____.

Loan was for _____ MONTHS.

Number of payments you think you have made: _____.

Have you had a loan extended? (circle one) **YES** (how many _____) **NO**

IF you know payoff on loan, please put here: \$ _____.

Have you given any other creditor the title to this vehicle as security for a loan?

If yes, which creditor: _____.

II. Do you own a vehicle that is paid for with no creditor holding title?

IF YES:	<u>Year, Model</u>	<u>Mileage</u>	<u>Value</u>	<u>Title in name of</u>
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1.

2.

3.

MISCELLANEOUS INFORMATION

- a. Do you have a checking, savings, or other account with any bank, savings and loan association, or credit union? Yes ___ No ___. In what bank(s)? _____.
- b. How much cash (including funds in any checking or savings account) do you have? _____.
- c. Do you anticipate, or have you already received, a tax refund for the 2017 year? (tax return due by 4/15/17)
Yes ___ No ___.
If so, how much? IRS \$ _____ S.C. or other state \$ _____
Have you filed all required tax returns in the past 4 years? Yes ___ No ___
Do you owe taxes? Yes ___ No ___.
- d. If you have been divorced or separated, did a family court order you to assume responsibility for marital debts incurred during that marriage? Yes ___ No ___ When? _____
- e. Have any of your debts been cosigned or guaranteed by someone other than your current spouse?
Yes ___ No ___.
If yes, please provide name(s) of cosigner(s) and creditor. _____

- f. Do you own any of the following?
(1) stocks? Yes ___ No _____.
(2) bonds, including United States Savings Bonds? Yes ___ No _____.
(3) machinery, or fixtures used in a business or work? Yes ___ No _____.
(4) animals of value (other than pets)? Yes ___ No _____.
(5) firearms? Yes ___ No _____. Type _____ Value \$ _____
(6) boats? Yes ___ No _____.
(7) books, prints, pictures, stamps, coins, or sports equipment of value? Yes ___ No _____.
(8) IRA/401K/other retirement? Yes ___ No _____. If yes, amount in account \$ _____.
(9) tools? Yes ___ No _____. Please give a general description _____.
- g. Does anyone owe you any money? Yes ___ No ___.
- h. Do you have any pending lawsuits or right to bring a suit for bodily injuries? Yes ___ No _____.
Have you consulted with any attorney about any other matter within the last year? Yes ___ No ___. If you answered yes to either of these questions, please provide additional information and/or explanation: _____.
- i. Other than these items, do you own anything that this form did not address? Yes ___ No _____. If yes, describe: _____.
- j. Have you transferred any assets to any friends or family members in the last 12 months? Yes ___ No _____. If yes, indicate what was transferred and when. _____
- k. Have you ever filed bankruptcy before? Yes ___ No _____. If yes, indicate location of court, the type of case filed, and approximately when filed. _____.

HOUSE:

If you own a house, please answer these questions. If not, leave blank.

WHERE IS HOUSE LOCATED?

Street Address: _____

(Include city, ZIP)

Subdivision, if one _____

County _____

PURCHASE OF HOUSE *(use best guesses - please tell us if you are guessing)*

DATE PURCHASED: _____ PURCHASE PRICE: _____

IN WHOSE NAME IS HOUSE TITLED? _____

VALUE OF HOUSE - Estimate Present Value \$ _____

If you know what County appraisal is, please provide. \$ _____

MORTGAGE PAYMENTS: Please list all mortgage holders, listing first mortgage holder first. Please fill out all information requested..

	<u>Name of Mortgage Holder</u>	<u>Monthly Payment</u>	<u>Current ? (Yes - No)</u>	<u>If you are not current, what month do you owe for ?</u>	<u>Best Estimate of Payoff Balance</u>
1st Mortgage	_____	\$ _____	_____	_____	\$ _____
2nd Mortgage (if one)	_____	\$ _____	_____	_____	\$ _____
3rd Mortgage	_____	\$ _____	_____	_____	\$ _____

Do your mortgage payments include: Escrow Taxes Insurance None

Is your mortgage a VA guaranteed loan? YES or NO (circle one)

OTHER REAL ESTATE OWNED:

If you own other real estate, please answer these questions.

- a. Describe and give the location of all other real estate (lot, building/house, land, or burial plot) in which you hold an interest: _____

- b. How is property titled? _____

- c. Purchase price: \$ _____ Year purchased: _____
- d. Outstanding mortgage balance(s) (if any): _____

- e. Name of mortgage holder(s): _____

- f. Present value of the property: \$ _____

MOBILE HOME:

If you own a mobile home, please answer these questions. If not, leave blank.

Is this your residence? Yes _____ No _____

IN WHOSE NAME IS MOBILE HOME TITLED? _____

VALUE OF MOBILE HOME

Estimate Present Value \$ _____

If you know what County appraisal is, please provide. \$ _____

Do you plan to keep or surrender the mobile home? KEEP SURRENDER (circle one)

If you do not live in the mobile home, do you receive rent for it? YES _____ NO _____

If yes, how much? \$ _____, per _____.

LOAN PAYMENTS: Please list all lienholders and information requested.

<u>Name of Lienholder</u>	<u>Monthly Payment</u>	<u>Current? (Yes-No)</u>	<u>Due Date</u>	<u>Best Estimate of Payoff Balance</u>
1st lien _____	\$ _____	_____	_____	\$ _____

TAXES, INSURANCE INCLUDED? YES - NO

2nd Lien _____	\$ _____	_____	_____	\$ _____
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MONTHLY BUDGET

*****Please convert ALL expenses to what you spend on them MONTHLY*****

EXPENSE	HOW OFTEN DO YOU PAY THIS?	AMOUNT	NOTES:
Mortgage or mobile home (1 st , 2d, 3d) payment (circle which)			include all mortgages in this figure
Rent			
Lot rent			
Property taxes			if not incl in mtg/ MH pymt
Property insurance			if not incl in mtg/MH pymt
Property maintenance (repairs & upkeep)			
Electricity (& heating fuel)			
Water, sewer & trash			
Telephone (including cell)			
Cable			
Groceries, food, lunch money, etc			
Child care or tuition			
Medical insurance			taken out of pay?
Medical & dental (visits, prescriptions, etc.)			monthly average of out of pocket
Alimony / child support / court ordered payments			
Auto/truck payments (total)			
Auto maintenance			monthly average
Auto insurance			
Auto taxes			
Auto gas or other transportation costs			
Life insurance			
Clothing			
Laundry / dry cleaning			
Entertainment, newspaper, etc			
Charitable contributions (church, etc.)			
Union / club dues			
Hair cuts			
Emergency fund, gifts, misc			

PLEASE LIST EACH CREDITOR YOU OWE AND HOW MUCH YOU OWE TO EACH ONE, EVEN IF YOU THINK IT IS SOMEONE WHO SHOULD NOT BE INCLUDED IN THE BANKRUPTCY

CREDITORS:

CREDITOR NAME: APPROXIMATE BALANCE OWED: SECURITY/COLLATERAL

PLEASE LIST ANY DEBTS COSIGNED BY SOMEONE ELSE. PLEASE ALSO BE SURE THAT ALL CREDITORS LISTED ELSEWHERE IN THIS PACKAGE ALSO APPEAR ON THIS LIST.