

BANKRUPTCY INSTRUCTION SHEET

In preparation for filing bankruptcy, please note the following:

1. All debt, no matter how large, must be included in the bankruptcy petition. This includes debts owed to friends, relatives, or neighbors.
2. Please note that certain debts incurred shortly before filing your Petition and/or shortly after consulting with an attorney about your financial problems may not be discharged by the Court.
3. We must be informed of any changes in your circumstances, such as obtaining a new job, leaving your current job, moving, the receipt of any income or any other property and so on. You must not sell, give away or purchase major assets until you have consulted with your attorney.
4. If you are sued by a creditor at any time after speaking with your attorney, you should contact your attorney immediately.
5. Once you are nearing your filing for bankruptcy, stop paying all debts which are going to be discharged. You should continue to pay only those bills which are going to “survive” the bankruptcy (like mortgages or car payments) or those for necessary items like current utilities or rent.
6. Please note that your secured creditors may not send you billing statements during the bankruptcy process.
7. If you receive any money or property as a result of an inheritance or divorce within six months after filing bankruptcy, you must inform your attorney immediately.
8. Please note that savings and checking accounts can be taken by a creditor when the bankruptcy petition is filed and that any money in them may be turned over to your Trustee. Therefore, we advise you to discuss with your attorney whether to withdraw any monies in any bank accounts before you sign the bankruptcy petition. This could include any “float,” or amount committed to expenses, but not yet paid.
9. To insure that you have included all of your debts you must obtain a credit report and provide a copy to us. You can obtain one (1) free credit report per year by

contacting Annual Credit Report Request Service, P.O. Box 105281, Atlanta, GA 30348-5281; Toll-free: 877-322-8228; Online: annualcreditreport.com.

10. Please answer every question. If the questions are not applicable, so state. If you do not understand a question please call the office. If you need more room to answer a question, please attach extra pages.
11. If you are not certain as to an amount that you owe, or for the value of some property, you can estimate if you do not know. Mark that amount "estimate".
12. Please be advised that some utilities, such as Duquesne Light, may require a security deposit to provide continued service. The amount of the deposit is approximately two (2) months' usage.
13. **Please bring the following with your completed workbook: copy of tax return for the past two (2) years, copy of any court papers served on you or filed against you, tax notices, contracts and copies of the past six (6) months pay stubs, market analysis/appraisal of real property, copy of recent 401(k) statement. If you are married and your spouse is not filing we will need a copy of his or her past six (6) months pay stubs also.**

Official bankruptcy forms will be prepared using the information contained in this questionnaire, and you will be required to sign the official bankruptcy form under oath. The failure to provide complete and accurate information on the official bankruptcy forms can result in your debts not being discharged in bankruptcy.

14. You are now required to have budget counseling by an accredited agency within 180 days prior to filing your bankruptcy petition. **You will also be required to obtain financial management instruction after the Petition is filed, but before the final Order of Discharge of your debts. Failure to complete this financial management class within forty-five (45) days of your bankruptcy hearing will result in the Court's refusal to grant you a discharge of your debts.**

QUESTIONS

Name and residence:

What is your full name? _____

Have you used any other names in obtaining credit?

If yes, list any other name: _____

Your Spouse's full name? _____

Has your Spouse used any other names in obtaining credit?

If yes, list any other name: _____

Your current address including zip code: _____

Your Telephone Number: Home _____ Work _____

Your E-Mail Address: _____

Your Social Security Number: _____

Your Spouse's Social Security Number: _____

What other names have you used or have been known by during the last two (2) years?

What other names have you done business under during the last six (6) years?

How long have you lived at your present residence? _____

List the towns and cities where you have lived during the last three (3) years.

Start with your present home and work back including the dates you've lived there:

PERSONAL PROPERTY

Please answer all questions. If you do not own the type of property, write "none" under the description and location column. Specify (H)usband, (W)ife, or (J)oint.

TYPE OF PROPERTY	DESCRIPTION	HWJ	VALUE
1. Cash on Hand	_____	_____	\$ _____
2. Checking, savings or other financial accounts or CD's	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
3. Security deposits with public utilities, telephone companies, landlords, and others	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
4. Household furnishings including bedroom sets, stereos, dining room table and chairs, sofa, TV, VCR, CD player, radios, living room	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
5. Books, pictures, art objects, coin, stamp, or other collections	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
6. Wearing apparel	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____

7. Furs and Jewelry _____ \$
_____ \$
_____ \$
_____ \$
_____ \$

8. Firearms, sports, photo and other hobby equipment _____ \$
_____ \$
_____ \$
_____ \$
_____ \$
_____ \$
_____ \$

9. Interest in insurance policies. Name of company and cash surrender value _____ \$
_____ \$
_____ \$
_____ \$
_____ \$

10. Annuities. Name of each issuer. _____ \$
_____ \$

11. Interest in IRA, ERISA, Keogh, or other Pension or property-Sharing plans _____ \$
_____ \$
_____ \$
_____ \$
_____ \$

12. Stock and interest in incorporated and unincorporated businesses _____ \$
_____ \$
_____ \$
_____ \$
_____ \$

13. Government and corporate bonds. _____ \$
_____ \$
_____ \$
_____ \$

14. Accounts receivable _____ \$
_____ \$
_____ \$
_____ \$

15. Other liquidated debts owing debtor, including tax refunds

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

16. Other contingent and unliquidated claims of every nature, including tax refunds, counter-claims of the debtor and rights to setoff claims

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

17. Autos, trucks, trailers and other vehicles. Describe year, make of auto, mileage, & Color

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

18. Boats, motors and accessories

_____	_____	\$
_____	_____	\$
_____	_____	\$

19. Office equipment furnishings & supplies

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

20. Machinery, fixtures, equipment and supplies used in business

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

21. Inventory

_____	_____	\$
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22. Animals

_____	_____	\$
-------	-------	----

23. Farm equipment and implements

_____	_____	\$
_____	_____	\$

24. Other personal property of any kind not already listed

_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

CREDITORS HOLDING SECURED CLAIMS

State the names, mailing address, including zip code, and account number, if any, of all creditors holding claims secured by property of the debtor(s) as of the date of filing the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, mortgages, deeds of trust, automobile loans, etc.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTORS	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, VALUE OF PROPERTY SUBJECT TO LIEN & DATE LOAN WILL BE PAID OFF	CONTINGENT	UNLIQUIDATED	UNDISPUTED	AMOUNT OWED
ACCOUNT NO. 123-456-7890 PNC BANK 111 Park Drive Pittsburgh, PA 15214			1. 3/98 2. Mortgage 3. 2018 VALUE \$ 130,000				\$ 95,000
ACCOUNT NO. 			VALUE \$ 				
ACCOUNT NO. 			VALUE \$ 				
ACCOUNT NO. 			VALUE \$ 				
SUBTOTAL (Total of this page)							\$ _____
TOTAL (Use only on last page)							\$ _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTORS	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	UNDISPUTED	AMOUNT OWED
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
ACCOUNT NO.			VALUE \$				
Sheet no. ____ of ____ continuation sheets attached to Schedule of Creditors Holding Secured Claims				SUBTOTAL (Total of this page)		\$	
				TOTAL (Use only on last page)		\$	
				(Report total also on Summary of Schedules)			

CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

1. Do either of you owe any wages, salary or commission to anyone? If so, list the name of the person, the amounts owed and the date the services were performed.

2. Did anyone make any contributions to either of you for employee benefit plans in the last six months? If so, list the name of the person, the amount contributed and the date of the contribution.

3. Do either of you owe taxes to the federal government, state government, or any other taxing authority? If so, list name of the taxing authority, the address, the year for which the taxes are due, the type of taxes, and the amount owed (i.e., IRS, Dept. of Revenue).

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBATORS	HUSBAND, WIFE, JOINT, COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	TOTAL AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
ACCOUNT NO. 123-456-7890 Internal Revenue Service 999 Money Street Philadelphia, PA 12345			1. 4/99 2. Income Tax				\$ 1200.00	\$ 1200.00
ACCOUNT NO.								
ACCOUNT NO.								

EXAMPLE ONLY

CREDITORS HOLDING UNSECURED CLAIMS

Example: Medical bills, charge cards, utility bills. If you do not know the exact amount owed to the creditor, give an accurate estimate.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTORS	HUSBAND, WIFE, JOINT, COMMUNITY	1. DATE ACCOUNT WAS OPENED 2. LIST PURCHASES MADE 3. DATE YOU LAST USED ACCOUNT	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 123-456-7890 Citibank 1234 Main St. Sioux Falls, SD 12345			1. 3/94 2. Clothing, cash advances, vacation 3. 3/98				\$ 1200.00
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							

CREDITORS HOLDING UNSECURED CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBITORS	HUSBAND, WIFE, JOINT, COMMUNITY	1. DATE ACCOUNT WAS OPENED 2. LIST PURCHASES MADE 3. DATE YOU LAST USED ACCOUNT	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							

CREDITORS HOLDING UNSECURED CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBATORS	HUSBAND, WIFE, JOINT, COMMUNITY	1. DATE ACCOUNT WAS OPENED 2. LIST PURCHASES MADE 3. DATE YOU LAST USED ACCOUNT	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							

CREDITORS HOLDING UNSECURED CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTORS	HUSBAND, WIFE, JOINT, COMMUNITY	1. DATE ACCOUNT WAS OPENED 2. LIST PURCHASES MADE 3. DATE YOU LAST USED ACCOUNT	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							
ACCOUNT NO. 							

EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all existing contracts and all unexpired leases of real or personal property. Include any timeshare interest. State whether you are the lessor or the lessee of a lease. Provide the full names and complete addresses of all parties to each lease or contract described. → i.e: car leases, phone contracts, apartment leases

1.) Do you have a lease? ____ yes ____ no

2.) Name and address of other parties to lease.

3.) Description of contract or lease and nature of your interest in the lease.

4.) Is this lease for non-residential real estate?

_____ yes _____ no

If yes, for what property?

CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Debtor's Marital Status: _____

Dependents of Debtor and Spouse:

Name	Age	Relationship

Employment: Debtor Spouse
Occupation: _____
Name of Employer: _____
Address of Employer: _____
How Long Employed: _____

	DEBTOR	SPOUSE
Income: (Estate of average monthly income)...	\$ _____	\$ _____
Estimate monthly overtime.....	\$ _____	\$ _____
SUBTOTAL.....	\$ _____	\$ _____
Less Payroll Deductions		
a.) Payroll taxes and Social Security.....	\$ _____	\$ _____
b.) Insurance.....	\$ _____	\$ _____
c.) Union Dues.....	\$ _____	\$ _____
d.) Other.....	\$ _____	\$ _____
Total Deductions	\$ _____	\$ _____
TOTAL NET MONTHLY TAKE HOME PAY....	\$ _____	\$ _____
Regular income from operation of business.....	\$ _____	\$ _____
Income from real property.....	\$ _____	\$ _____
Interest and Dividends.....	\$ _____	\$ _____
Alimony, maintenance or support payments To the debtor for the debtor's use or that of the Dependents listed.....	\$ _____	\$ _____
Social Security or government assistance.....	\$ _____	\$ _____
Pension or retirement income.....	\$ _____	\$ _____
Other (Specify) _____	\$ _____	\$ _____
TOTAL MONTHLY INCOME.....	\$ _____	\$ _____
TOTAL COMBINED INCOME.....	\$ _____	\$ _____

ATTACH RECENT PAYSTUB(S) AND MOST RECENT TAX RETURN OR W-2

CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses and the expenses of your family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show the monthly rate.

Rent or home mortgage payment.....	\$ _____
(include lots rented for mobile home)	
Real Estate taxes.....	\$ _____
Utilities:	
Electricity and heating fuel	\$ _____
Water and sewer.....	\$ _____
Telephone.....	\$ _____
Cable.....	\$ _____
Other.....	\$ _____
Home maintenance (repairs and upkeep).....	\$ _____
Food.....	\$ _____
Clothing.....	\$ _____
Laundry and dry cleaning.....	\$ _____
Medical and dental expenses.....	\$ _____
Transportation (not including car payments, i.e. gas, oil, bus fare).....	\$ _____
Recreation (clubs and entertainment), magazines and Newspapers.....	\$ _____
Charitable contributions.....	\$ _____
Insurance (not deducted from wages or included in home mortgage payment).....	\$ _____
Homeowner's or renters.....	\$ _____
Life.....	\$ _____
Health.....	\$ _____
Auto.....	\$ _____
Other.....	\$ _____
Taxes (not deducted from wages) Specify _____	\$ _____
Installment payments:	
Auto.....	\$ _____
Other.....	\$ _____
Other.....	\$ _____
Alimony, maintenance and support paid to others.....	\$ _____
Payments for support of additional dependents not living in your home.....	\$ _____
Regular expenses from operation of business, profession, or farm (attach detail statement).....	\$ _____
Other.....	\$ _____
Other.....	\$ _____
Other.....	\$ _____
TOTAL	\$ _____

STATEMENT OF FINANCIAL AFFAIRS

1. Income from Employment or Operation of Business:

_____ None

a.) State gross amount of income you have received from your employment or business since the beginning of this year to date.

Your \$ _____ source _____

Spouse \$ _____ source _____

For Last Year

Your \$ _____ source _____

Spouse \$ _____ source _____

For Two (2) Years Ago

Your \$ _____ source _____

Spouse \$ _____ source _____

2. Income received by you from other than your employment or business:

_____ None

a.) State gross amount of income you have received from other sources since the beginning of this year to date.

Your \$ _____ source _____

Spouse \$ _____ source _____

For Last Year

Your \$ _____ source _____

Spouse \$ _____ source _____

For Two (2) years Ago

Your \$ _____ source _____

Spouse \$ _____ source _____

3. Have you paid more than Six Hundred Dollars (\$600.00) to any creditor within ninety (90) days of this date?

_____ yes _____ no

a.) If yes, then list the name and address of creditor, date of payments, amount paid, and amount owing:

b.) Have you made any payment to family or friends within the last year?

_____yes _____no

If yes, then list the name and address and the relationship they are to you, date of payment, amount paid, and amount owed:

4. Have you been party to a lawsuit within the last year?

_____yes _____no

If yes, then list the caption of suit and case number, nature of proceeding, court and location and status of disposition.

Has any of your property been seized or garnished within the year?

_____yes _____no

If yes, then list the Name and Address of Person for whose benefit property was seized, the date of the seizure and description of property.

5. Has any of your property been repossessed or sold at a foreclosure sale within the last year?

_____yes _____no

If yes, list the name and address of creditor, the date of Foreclosure, sale or transfer, description or value of property.

6. List all gifts to family or charities in excess of One Hundred (\$100.00) dollars made by you within the four (4) years. List name and address of person receiving charity, relationship to debtor, date of gift, description and value of gift.
