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ABOUT THE FACT SHEETS

Thank you for inquiring about bankruptcy with our office. We hope to make your experience in these hard times as pleasant as possible. I wanted to include some instructions on filling out the Client Interview Worksheets. The purpose of these forms is to help the attorney fully understand your financial situation so that she may advise you accordingly. It is very important to have this interview sheet filled out completely.

On the back page you have to list the past 6 month's gross income (before any deductions). There are 6 blank spaces to write the name of the month as well. Please do not leave any of this blank. If there is a month when you did not receive any income, please mark it with a zero 0. If you are married and want to file individually, we will still need your spouse's information on these forms.

If at any time you have questions, please fill free to call me at the above number or email me at jessica@davisandgoldsmith.com. If for any reason you forget to bring the forms, or if they are not complete, we will reschedule your appointment. The attorney can't offer you sound advice without the information we have requested.

Again if you have any questions please contact me. Have a great day and we look forward to meeting with you.

Sincerely,

Jessica Streater
Assistant to Attorney Amy S. Davis

Client Information Worksheets

	Debtor	Spouse
Full Name:	______________________	______________________

Filed before? Yes______ No_________ When:_________ Where:_____________

Number of Dependants Living with You _________ Household size ______________

Employer: ______________________________ ______________________________

How long have you lived in NC? _______________ Phone #:__________________________

Address:____

What goal do you want to accomplish in bankruptcy?

a) Save a house ________

b) Save a car __________

c) Start over after releasing property _______

d) Get rid of overwhelming unsecured debt_____

e) Other______________________________

FAMILY INCOME

	DEBTOR	SPOUSE
Gross wages, salary, commissions		
Estimated monthly overtime		
Subtotal of income		
Payroll Deductions:		
Payroll taxes & social security		
Insurance		
Union Dues		
Other (SPECIFY)		
Subtotal of Deductions		
Other income:		
Regular income from business, farm or profession		
Income from real estate property		
Interest & dividends		
Alimony or support payments payable to debtor or dependents		
Social security or other government benefits (SPECIFY)		
Pension and/or retirement		
Other income (SPECIFY)		
Subtotal of other income		
TOTAL MONTHLY INCOME		

MONTHLY EXPENSES FOR FAMILY

Rent or mortgage payment	
(Include lot rent for mobile home)	
Property taxes included in payment □ Yes □ No	
Property Insurance included in payment □ Yes □ No	
Electric/Heating Fuel	
Water & Sewer	
Total Telephone Expense	
Cable	
Internet Service	
Home Maintenance	
Child Care	
Food (include lunches)	
Clothing	
Laundry & Dry Cleaning	
Medical & Dental	
Transportation (not car payment)	
Recreation (newspaper, magazines, entertainment, club, etc.)	
Charitable Contribution	
Insurance (not deducted from wages or included in mortgage)	
Homeowners or Renters Insurance	
Life Insurance	
Health Insurance	
Auto Insurance	
Other **(SPECIFY)**	
Taxes (not deducted from wages or included in mortgage) **(SPECIFY)**	
Alimony, support paid to others **(SPECIFY)**	
Other **(SPECIFY)**	
Total Monthly Expenses	

HOMES:

	Whose name is it in?	Loan Amount	Behind ?	Monthly Payment
House 1				
2^{nd} Mortgage				
House 2				
2^{nd} Mortgage				
Additional Properties				

Description Of Vehicle	Title to?	Value	Loan Amount		Monthly Payment	Date of purchase
				$		
				$		
				$		
				$		

Notes:

Credit Cards, Signature Loans, Cash Reserve and Repossessions.

CARD NAME/Personal Loans	AMOUNT OWED
TOTAL	

TAXES

State/Federal/County	Year	Amount

LAST SIX MONTHS OF GROSS INCOME
(GROSS =BEFORE TAXES & DEDUCTIONS ARE TAKEN OUT)

Husband Month	Gross (**Before Taxes**)	Wife Month	Gross (**Before Taxes**)
Most recent month			
6 months ago			

IF YOU DO NOT FILL OUT THIS PAGE COMPLETELY, WE WILL NOT CONDUCT A CONSULTATION, AND WE WILL RE-SCHEDULE YOU!!

Please make sure that you put the month and gross amount (before taxes are taken out) on the lines above. Please bring a print out or pay stubs for the last six months income from employer for verification purposes only.

IF YOU PAY CHILD SUPPORT

Yes/No Amount________ Are you behind?____________

How do you pay? ____________

Who do you pay?

NOTES: