

BANKRUPTCY CONSULT QUESTIONNAIRE

1. Personal Information (Debtor)

Date: _____

Full Name: _____

Home Address: _____

Phone number: _____ E-MAIL ADDRESS: _____

Occupation: _____ Age: _____

Marital Status: _____ # of dependent children: _____

2. Personal Information (Co-Debtor/ if applicable)

Full Name: _____

Phone number: _____ E-MAIL ADDRESS: _____

Occupation: _____ Age: _____

3. Estimated gross income: complete the blocks below for ALL sources of income: job, unemployment, worker's comp, food stamps, child support, Soc. Security, retirement, tips, under the table income, TDI.

Source	Gross (before taxes)	Net (after taxes)	How often received?

4. Estimated debt: all outstanding must be declared in your bankruptcy, including \$ owed to family.

Types of Debt	Number of accounts	Total Amount	Current?	
Credit Cards			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mortgages			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vehicle Loans/ Leases			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Medical Bills			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Student Loans			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Personal Loans			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Unpaid income taxes			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Documents Necessary for First Meeting: Tax Returns for prior 2 years, paystubs for past 7 months (including spouse), All bills, credit card, and mortgage statements, debt collection letters, lawsuits and lawyer notices, credit reports: www.annualcreditreport.com copy of deeds, mortgage statement, and judgment liens If divorced in past 3 years, a copy of divorce decree/property settlement After getting pre-qualified by phone, you will need retainer of \$ 500 to set 3-hour appointment along with voided check to set up automatic payment plan for the balance.

How did you hear about me? Referral Google Newspaper Other: _____

No	SIMPLE BANKRUPTCY YES/NO CHECKLIST	Yes	No
1	Have you filed for bankruptcy protection in the past 8 years?	<input type="checkbox"/>	<input type="checkbox"/>
2	Have you lived exclusively in Rhode Island the last 24 months?	<input type="checkbox"/>	<input type="checkbox"/>
3	Do you have your name on any deed to real estate?	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you owned any other real estate in the last 4 years?	<input type="checkbox"/>	<input type="checkbox"/>
5	Does ANYONE owe you ANY money or property for ANY reason?	<input type="checkbox"/>	<input type="checkbox"/>
6	Have you been involved in an auto accident in the last 3 years?	<input type="checkbox"/>	<input type="checkbox"/>
7	Do you have the right to sue anyone for any reason?	<input type="checkbox"/>	<input type="checkbox"/>
8	Do you have Whole Life insurance that has a present cash surrender value?	<input type="checkbox"/>	<input type="checkbox"/>
9	Have you been self-employed or operated a business in past 8 years?	<input type="checkbox"/>	<input type="checkbox"/>
10	Are you expecting an income tax refund?	<input type="checkbox"/>	<input type="checkbox"/>
11	Did you give gifts worth more than \$ 200 to ANYONE in prior year?	<input type="checkbox"/>	<input type="checkbox"/>
12	Did you make a charitable donation worth more than \$ 100 in prior year?	<input type="checkbox"/>	<input type="checkbox"/>
13	Are you a beneficiary of a Trust?	<input type="checkbox"/>	<input type="checkbox"/>
14	Are you entitled to an inheritance from an estate?	<input type="checkbox"/>	<input type="checkbox"/>
15	Did you repay ANY personal debts owed to friends or family in past year?	<input type="checkbox"/>	<input type="checkbox"/>
16	Did you sell, transfer, or give away ANY personal property in prior 2 years?	<input type="checkbox"/>	<input type="checkbox"/>
17	Did you close ANY financial accounts in last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
18	Do you owe money to any friend or family member?	<input type="checkbox"/>	<input type="checkbox"/>
19	Did you repay any single creditor an aggregate of \$ 600 in last 90 days?	<input type="checkbox"/>	<input type="checkbox"/>
20	Have you had ANY property seized, foreclosed or attached in prior year?	<input type="checkbox"/>	<input type="checkbox"/>
21	Did you take a distribution of retirement assets in last 6 months?	<input type="checkbox"/>	<input type="checkbox"/>
22	Have you taken cash advances or balance transfers in past year?	<input type="checkbox"/>	<input type="checkbox"/>
23	Have you purchased a big ticket item (worth over \$ 500) in prior year?	<input type="checkbox"/>	<input type="checkbox"/>
24	Have you been a party to any lawsuits/ legal actions in prior year?	<input type="checkbox"/>	<input type="checkbox"/>
25	Did you have any gambling losses in the prior year?	<input type="checkbox"/>	<input type="checkbox"/>
26	Is your name on anyone else's bank account or real estate?	<input type="checkbox"/>	<input type="checkbox"/>
27	Did you meet with/ pay money to another bankruptcy lawyer in last year?	<input type="checkbox"/>	<input type="checkbox"/>
28	Have you had a safe deposit box in the last year?	<input type="checkbox"/>	<input type="checkbox"/>

Upon Completion: (1) fax to 537-3461 or (2) email pdf to mark@attorneybuckley.com or (3) mail to Mark Buckley Esq., 511 Greenbush Road, East Greenwich, RI 02818 or (4) CALL 467-6800 to discuss.