BANKRUPTCY QUESTIONNAIRE

There are four sections to this questionnaire: (1) General biographical; (2) Income and Expenses; (3) Secured Debts; and (4) Business Owners. If you do not have any secured debts, and do not own a business, you will only need to fill out two of the four sections. If you do not have any secured debts (for example home or car loans), check this box and skip the Secured Debt Worksheet. If you have not owned a business in the past year, check this box and skip the Business Worksheets (the Business Worksheets may not be included in your packet, but will be sent to you upon indication that you have operated a business within the past year).					
information, so several "yes/no your real estate approximately	uch as your name, address o" questions about your pe e, financial accounts, and	er, phone numbers, and ersonal property and revehicles in order to fi	In both sides) and asks you to produce the information about your he financial affairs. You will need call out this section. It is estimated section once you have located the	ousehold, including documentation regarding I that it will take	
Date:					
Full Legal Nat	me:		Marital status:		
Phone Number	rs: Home:	Cell:	Work:		
Email address:			Date of Birth:	SS#:	
Spouse's Full	name:		Date of Birth:	SS#:	
Address: (Stre	et number & name, city, s	tate, zip):			
Names and ago	es of dependents and child	lren living at home:			
Do you intend	for this to be filed as a jo	int or solo bankruptcy	y petition?		
Have either yo	ou or your spouse:				
a.	a. Filed bankruptcy in the past 8 years?				
b.	Used a different name?	Used a different name? If yes, please list:			
c.	c. Lived at a different address within the past 3 years? List all prior residences within the past 3 years, and the date between which you lived at each residence:				
d.	d. Have either you or your spouse served in the military in the past 10 years? If yes, was any of your debt incurred while in the military?				

List the address or description of any real estate (including your homestead, personal residence, rental property, vacant land, farms, partial interest in farm ground or farming or land partnerships) that either you or your spouse own:

If you own a home, what year did y continuously since this date? home in Iowa? If yes, which Iowa?	Did you incur any of y	our current debt pri	Have you owned a home or to the date you first purchased a o the purchase of your first home in
If you rent or lease property, pleas and security deposit:	se provide the name and a	address of your land	dlord, amount of the monthly rent
Do you owe any back taxes to the	IRS or Iowa Department	of Revenue? If so	, what years, and how much?
Do you have any unpaid student lo monthly payment:	oans? If yes, please prov	ide details of the le	nder's name, address, balance, and
<u>Vehicles:</u> Provide the following	information about the vel	hicle(s) you own:	
Vehicle #1: Year: Mak Titleholder(s) (Names on the title)		Model:	Miles: ndition of Vehicle:
<u>Vehicle #2</u> : Year: Mak Titleholder(s) (Names on the title)		Model:	Miles: ndition of Vehicle:
Vehicle #3: Year: Mak Titleholder(s) (Names on the title)		Model:	Miles: ndition of Vehicle:
Vehicle #4: Year: Mak Titleholder(s) (Names on the title)		Model:	Miles: ndition of Vehicle:
Financial Accounts Information	L		
If you have bank accounts, brok plans such as IRA's or 401(k)'s, necessary):	_		· •
Type of Account (checking, saving Bank/company:			
Account titleholder (husband, wife			
Type of Account:			
Balance:	Titleholder:	Be	neficiary:
Type of Account:	Bank/company:	Ac	count #:
Balance:			
Type of Account:	Bank/company:	Ac	count #:
Balance:	Titleholder:	Be	neficiary:

Personal Property List We are required to list all assets you have in your possession at the time of filing your bankruptcy petition. Please indicate if you own any of the following items by entering "x" or " $\sqrt{}$ " in the box next to the item. Checking Accounts ATVs, snowmobiles, motorcycles **Savings Accounts** Aircraft and accessories Certificates of Deposit (CDs) Office equip, furn, & supplies Stocks, mutual funds Jet skis, wave runner, water toy motorbike, go-cart, motor vehicle of any kind Bonds Brokerage account Camper, trailer, motor home, R.V. Life Insurance Annuities Indicate how many of the following items that you have in the right-hand portion of the column: **Qualified Retirement Plans** IRA, Keogh, Pension, 401k Jewelry Beds or Bedroom sets: Autos, trucks, trailers, vehicles Living room sets: Camcorder Dining room sets: Lawnmower Televisions: Snow blower CD players: DVD players: Flatware, silverware & cutlery Cooking utensils VCRs: Hand tools Stereos: Washer and dryer Computers: Firearms: Microwave Stove and oven Furs: Refrigerators: Dishwasher Vacation house, trailer or lot Dressers, chests: Boats, motors and accessories List any other personal property you own that is not listed above: **Referral Information**: How were you referred to Beecher Law Firm and Attorneys Kevin Ahrenholz: Yellow Book yellow pages; Dex yellow pages; Friend / family member; Credit counselor: _____ (name); Another attorney: _____ (name); Used Beecher Law Firm before; Other phone book: (name); Google search (paid ad); Google search (organic listing); YellowBook.com internet search;

Dex Knows internet search; Other referral source: _____ (name).

If you used the internet to find us, what search terms did you use in your search:

Best days of week and times of day to reach you by phone:

Internet search using other search engine:

_____ (name of search engine);

Check the following boxes if the answer to the question is "yes" and leave blank if the answer is "no.'

Do you have or own any of the following:
Interest in partnerships, joint ventures, family or farm partnerships
Patents, copyrights, and other intellectual property, licenses, franchises or other intangibles
Machinery, fixtures, equipment, or supplies used in business
Inventory
Income producing animals
Crops-growing or harvested
Farming equipment, implements, supplies, chemicals or feed, or farm land / farm trust
Are you currently serving as a Trustee or Executor of an estate or trust?
Do you expect to inherit any assets within the next year (or have you recently inherited anything or are you
in the process of inheriting anything)?
Have you paid any creditor more than \$600 within the last 90 days?
Have you paid or repaid any money to a family member, friend or business partner in the last year?
Have you made any gifts to charity, churches, family or friends of more than \$100 in the last year?
Have any bank or brokerage accounts been closed in the last year?
Have you had a safe deposit box in the last year?
Are you in possession of any property that belongs to someone else?
Are you a beneficiary to any trust or estate?
Are you a party to any contracts or leases (i.e., car, apartment, cell phone, office equipment)?
Do you have any co-debtors or co-signers on any debts you have (other than your spouse)?
Are you behind on any rent/house payments?
Have you transferred any assets to a trust in your lifetime?
Are you receiving money from a past lawsuit or structured settlement?
Are you receiving any money/benefits from an annuity?
Have you lived outside of Iowa during the past 3 years?
Have you been a party to any lawsuit, garnishment, levy, execution, attachment, repossession,
foreclosure, return, assignment or receivership within the past year?
Do you have any judgments against you? (The Judgment Lien can be released at an additional
charge of \$275 per lien).
Do you have a claim against anyone for any reason (i.e. insurance benefits, collection of a debt,
personal injury, workers compensation, beneficiary of a trust or estate?)
Have you taken any cash advances or charged anything on a credit card within the last 90 days?
If "yes" to the last question, how much money have you charged, taken in the form of cash
advances or balance transfers within the past 90 days?
Have you sold, traded, or given away <u>any</u> assets (property, money, etc.) within the last 2 years?
If yes, please list all assets transferred within 2 years:

Income and Expense Worksheet

This section is four pages in length (front and back / double-sided). In order to complete this section you will need your budget, check book ledger, credit card statements, and any other documents that will help you determine what your average monthly expenses are for each expense category, and the names of your creditors. You may also need your last two tax returns, W-2s and a recent pay stub to answer the income portion. It is estimated that this worksheet can be completed in as little time as 15 minutes for those who are organized and familiar with their budget, but could take as long as one hour or more for those that need more time going through documents to determine averages.

Calculating your average monthly expenses for each budget category is crucial to planning your future budget, and to determining bankruptcy eligibility. THIS MAY BE THE MOST IMPORTANT EXERCISE YOU PERFORM, so take time to complete it accurately. It will help determine whether you are eligible for bankruptcy, and if so, whether you are eligible for a Chapter 7 or a Chapter 13 bankruptcy. Take time to determine what your average monthly expenses are for each expense category by examining your checkbook and credit card statements. Please add expense categories that I have not included in the worksheet if they apply to your situation. Make sure to include ALL of your expenditures. If you leave some out, or UNDER estimate certain expenses, it will hurt you in your bankruptcy proceedings. Better to err on the side of including too many expenses, and overestimating your expenses, than it is to forget to include expenses. I can always eliminate expenses that are too high or that are not permitted, but I have to know about all of them in order to best represent you.

Income Information

Please send as all pay stubs from	n all jobs for the past 6 months with this Qu	uestionnaire.
How much is your <u>NET</u> (not Gross) monthly income	e from wages from <u>all</u> jobs?	
How much is your spouse's net monthly income?		
How much <u>per month</u> do you or your spouse earn fro Operation of business or farm: Interest or dividends: Pension or retirement income: Social Security (SSI, SSDI), unemployment	Rental property/real estate Alimony, maintenance, ch Food Stamps:	
Do you or your spouse earn any other monthly incom	,	
Do you expect any substantial increase or decrease is	n earnings (by 10% or more) in the next year?	,
What is your hourly pay rate: What is your spouse's hourly pay rate:	Annual salary (if applicable): Annual salary:	
Has either your rate or your spouse's rate of compen Have either you or your spouse experienced a chang (If you answered "yes" to either of these last two que	e in employment within the past 6 months?	
Provide your employer's name and address: Your Occupation:	Length of time employed there:	
Provide you Spouse's employer's name and address: Spouse's Occupation: (If you have more than one employer, provide the na	Length of time employed there:	
Total income earned by you this year-to-date:(Check your tax returns or W-2's:	Last year:	The year before last year: of your last year's tax return.
Total income earned by your spouse this year-to-date	e: Last year:	. The year before last

. (Check tax returns or W-2's from the last two years.) Please send copies of your last year's tax return.

Monthly Average Expenditures

Rent or Mortgage paymer	nt: Are i	real estate taxes includ	led? Is prope	rty insurance included?
Electric and heat:	Water and sev	wer:	Telephone/Cell phone:	Cable/internet:
Garbage collection:	Laundry / dry	cleaning:	Clothing:	Recreation / Entertainment:
Food (groceries, dining, e	ntire family):		Gas, oil changes, auto mai	ntenance, public transit:
Household supplies (clear	ning supplies, toiletries,	WalMart/Target expe	nses):	
Home repairs, upkeep, lav	wn care, snow removal (monthly average):	Associat	tion / Condo Fees:
Medical, dental, optometr	y, health aids (co-pay, o	ut of pocket, prescript	ion drug. Do NOT include	e premium payments):
Monthly Insurance Pren	niums for: Heal	th insurance premium	s deducted from pay check	:
Health insurance premiun	ns paid out of pocket (no	t deducted from pay s	tub, or paid by employer):	
Homeowners / renters ins	urance:	Life insurance:	Auto Ins	surance:
Disability insurance:		Other insurance (specify):	
Monthly payments for:	Vehicle #1:	Vehicle #2:	Vehicle #3:	Vehicle #4:
Back taxes:	Property Taxes:	Student Loans:	Child Support:	Alimony:
Misc Monthly Expenses	for : Child Care:	Pet Care:	Charitable / Chur	rch Tithe:
Gifts:	School lunches:	Extracurricular ac	etivities:	Tobacco/cigarettes:
Personal grooming / hairc	uts:	Bank fees:	Car license, title,	registration fees:
Lot rent:	Storage unit:	furniture / proper	ty rental:	Alarm / security system:
Health aids:	Monthly payments to c	eredit cards, medical b	ills, loans, and other unsec	ured creditors:
Day Care / Preschool:	Educational:	Account	ing/Attorney/Broker Fees:	
Other Expenses (specify):		Total Average M	Ionthly Expenses (Total or	f all above categories):

If you own one or more life insurance polices, please complete the following section. If not, you may skip this. If your employer owns a policy on your life, you do not need to include that here.

Life Insurance Information:				
Company Name:	Is the policy Term or Whole Life (Cash Value)?			
Amount of the cash value:	Have any loans been taken against it? How much?		How much?	
Date of loan?	Name of the P	olicy Owner?		
Name of Insured (Person whose life is	covered)?	Name of D	esignated Beneficiary?	
Do you have a Will?	Do you have a Living Will / Medical Power of Attorney?			
If the designated beneficiary is not y protected asset in a Chapter 7 bank creditors. You should change the be surrender this life insurance policy abankruptcy.	ruptcy. You wil neficiary now to	l lose the cash value to the to name either a spouse or a c	rustee for the benefit of your child (if applicable), or	
Taxes, Tax Returns, and Tax Refun	<u>ds</u> :			
Have you filed all required tax returns If not, what years still need to be filed Did you receive a tax refund last year	?	If "yes", how much	n?	
If you own real estate, are you current tax is delinquent?; Have the taxes prior to foreclosure?				
You may protect up to \$1,000 of tax debtors). If you expect to receive m the benefit of your creditors. Discus	ore than that wi	thin the next 6 months, you	may lose it to the Trustee for	
Child Support: If you pay child supp	port, please provi	de the following information:		
Name and address of the person(s) wh	o receive(s) child	support from you:		
Are your child support payments curre	ent?	If not, how much back child	d support do you owe?	
Do you have any property settlements	due and owing to	you from a former spouse?		
If you <u>receive</u> child support, provide the child support:	he following info	rmation: Name and address o	f the person(s) who pay(s) you	

If so, how much?

Are you owed back child support?

Secured and Unsecured Creditor Information

To assist with organization, please make a list below (or on another sheet of paper) of the names of each creditor you have (secured, unsecured, mortgage, credit card, medical, utility, lender, friends, family, etc), and the approximate year the debt was incurred. If the debt was incurred over several years, list the approximate year that the debt was last at a zero balance. *Names of creditors and dates only*. (You do NOT need to provide addresses, account numbers or balances).

NOT need to provide addresses, account numbers or bar	ances).
If you are NOT going to be providing an invoice along with their address, your account number, and appreciate of paper.	
I have reviewed this Questionnaire in its entirety the general biographical section, the Secured Debt Work answered all of it in its entirety to the best of my ability	ssheet, and the Business worksheet, and I have
Dated this day of	. 20
Client Signature	Client Signature

SECURED DEBT WORKSHEET

This document has four pages to it (double sided) and asks you to list all of the loans you have that are secured by some piece of property. For example, your home loan might be secured by your home through what is called a "mortgage." Your car loan may be secured by your car. These are different than your credit card debts which are not secured by any property. We call credit card and medical debts "unsecured" debts.

If you do not have any secured debt, please check this box:	
If you do not have any secured assets or debts, you may skip these four pa	ages.

This worksheet applies only to "secured debts." Please do your best to answer the questions provided. There is a separate section for each secured loan. If you do not have any secured loans, leave the worksheet blank. There is enough room (front and back) to fill in information for five (5) secured loans. Please feel free to use additional sheets of paper if you have more than five secured loans. In order to effectively complete this section it is best if you have a copy of the loan document available to refer to. Once you have those documents ready, it is estimated that it will take about five minutes to complete the worksheet for each loan. For example, if you have four secured loans, it is estimated that it will take 20 minutes to complete the worksheet. If you do not have the proper documents, it will likely take longer to complete.

Secured Assets:

List all of your assets in the left column that have loans tied to them, and in the right column, provide the name of the lender and the approximate loan payoff amount.

Example:

<u>Asset</u>	<u>Lender</u>	<u>Loan Balance</u>
Ноте	Wells Fargo Bank	\$50,000
Ford F-150	Bank of America	\$10,000

Please create your list below.

Trouse create your fist below	•	
Secured Assets	<u>Lender / Bank</u>	Approx. Loan Balance
1.		
2.		
3.		
4.		

6.

5.

SECURED LOAN # 1 Loan Company Name: Address of Lender: Account Number: Date of Loan: Original Loan Amount: Interest Rate: Years to repay: Monthly Payment Amount: Payment due date (each month): Payoff (balance of loan): Date last payment was made: Number of missed payments that have not been made up: Purpose of the loan (for example, to purchase a home, auto, furniture): Assets secured by the loan (what did you put up as collateral for the loan): Do you want to pay this loan back and keep the assets secured by it ("reaffirm"), or do you want to give back the assets and stop paying on the loan ("surrender")? Did you purchase any insurance with the loan (like credit life, disability, mortgage insurance): If you are in default, or are behind on payments for this loan, please answer the following questions. If you are not in default on this loan, please check this box \square , and you may skip the remaining questions in this section for this loan. How many months are you behind in payments? What is the total amount of back payments, interest, late charges and penalties you owe to bring this loan current? Have you received confirmation from your creditor that this amount will bring the loan current?

If you are in default or behind in any payments on a particular secured debt, and if you wish to use the bankruptcy process to become current (through Chapter 13 payments) please send copies of all loan documents with this questionnaire. These documents include promissory notes, deeds, mortgages, security agreements, a payment book coupon, invoices, monthly statements, recent letters from the creditor, and closing documents. If you are <u>not</u> in default on the loan, please just send a payment book coupon or monthly invoice from the lender.

Contact person at company (name, phone, email, fax, address):

If so, when?

SECURED LOAN # 2 (The remainded any given question, review the correspondent)			•	
Loan Company Name:	Aco	count Number:	Date of Loan:	
Address of Creditor:				
Original Loan Amount:	Interest Rate:	Years to repay:	Monthly Payment Amount:	
Payment due date (each month):	Payoff (balance of l	Date of last payment:		
Number of missed payments that have	not been made up:			
Purpose of the loan (for example, to pu	archase a home, auto, i	furniture):		
Assets secured by the loan (what did y	ou put up as collateral	for the loan):		
Do you want to repay this loan, or do y	you want to give back	the assets and stop paying	ng on the loan?	
Did you purchase any insurance with the	he loan?			
How many months are you behind?	How much	\$ to bring loan current:		
Contact person/info at lender (name, en	mail, phone, fax, addre	ess):		
SECURED LOAN # 3:				
Loan Company Name:	Aco	count Number:	Date of Loan:	
Address of Creditor:				
Original Loan Amount:	Interest Rate:	Years to repay:	Monthly Payment Amount:	
Payment due date (each month):	Payoff (balance of l	oan)	Date of last payment:	
Number of missed payments that have	not been made up:			
Purpose of the loan (for example, to pu	archase a home, auto, i	furniture):		
Assets secured by the loan (what did y	ou put up as collateral	for the loan):		
Do you want to repay this loan, or do y	you want to give back	the assets and stop payir	ng on the loan?	
Did you purchase any insurance with the	he loan (like credit life	e, disability, mortgage in	surance)?	
How many months are you behind?	1? How much \$ to bring loan current:			

Contact person/info at lender (name, email, phone, fax, address):

SECURED LOAN # 4

Loan Company Name:	Ac	Date of Loan:			
Address of Creditor:					
Original Loan Amount:	Interest Rate:	Years to repay:	Monthly Payment Amount:		
Payment due date (each month):	Payoff (balance of	Payoff (balance of loan) Date of last paym			
Number of missed payments that have	e not been made up:				
Purpose of the loan (for example, to	purchase a home, auto,	furniture):			
Assets secured by the loan (what did	you put up as collatera	l for the loan):			
Do you want to repay this loan, or do	you want to give back	the assets and stop payir	ng on the loan?		
Did you purchase any insurance with	the loan?				
How many months are you behind?	How much	\$ to bring loan current:			
Contact person/info at lender (name,	email, phone, fax, addı	ress):			
SECURED LOAN # 5					
Loan Company Name:	Account Number: Date of Loan:				
Address of Creditor:					
Original Loan Amount:	Interest Rate:	Years to repay:	Monthly Payment Amount:		
Payment due date (each month):	Payoff (balance of	loan)	Date of last payment:		
Number of missed payments that have	e not been made up:				
Purpose of the loan (for example, to	purchase a home, auto,	furniture):			
Assets secured by the loan (what did	you put up as collatera	l for the loan):			
Do you want to repay this loan, or do	you want to give back	the assets and stop payir	ng on the loan?		
Did you purchase any insurance with	the loan?				
How many months are you behind?	nd? How much \$ to bring loan current:				
Contact person/info at lender (name,	email, phone, fax, addr	ress):			