

# Law Offices of Jay P. Johnson

Ten First Avenue Suite 34

Peabody, MA 01960

(978) 531-5600

Facsimile (978) 531-5602

Email JPJ@JPJLaw.Net

## CLIENT INFORMATION WORKSHEET

(Joint Filing Non-Business)

Husband's full name: \_\_\_\_\_

Wife's full name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

County: \_\_\_\_\_

Preferred contact method  
(check one or more)

Home phone #: ( ) \_\_\_\_\_

Husband's work #: ( ) \_\_\_\_\_

Wife's work #: ( ) \_\_\_\_\_

Husband' cell #: ( ) \_\_\_\_\_

Wife's cell #: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Husband's social security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Wife's social security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Other tax ID #: \_\_\_\_\_

What other personal or business names have you used in the last six years?

\_\_\_\_\_  
\_\_\_\_\_

Prior Bankruptcies: If you have previously filed a bankruptcy petition, please list the case number, date, and location where you filed on the following lines:

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Pending Bankruptcies: If any immediate family member or business partner has a bankruptcy pending, please list the case number, name of debtor, relation to you, date and location where filed, and the bankruptcy judge on the following lines:

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Hazardous Property: Do you own or have possession of property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? (If yes, explain): \_\_\_\_\_

Have you completed a course in consumer counseling from an approved service and obtained a certificate? (If yes, please provide our office with the certificate and state the date of completion and name of provider below): \_\_\_\_\_

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Have you filed all your tax returns for the preceding four years? \_\_\_\_\_

Have you ever been involved in a civil or criminal proceeding wherein there was an allegation of fraud or similar claim? (If yes, describe in detail): \_\_\_\_\_

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## Your Real Property

Do you own real estate now?  Yes  No (If no then skip to page 4)

If yes, what is the:

- a) Address: \_\_\_\_\_
- b) Fair market value: \$ \_\_\_\_\_
- c) Total of all outstanding mortgages: \$ \_\_\_\_\_
- d) Are there any other liens against the property?  Yes  No

If yes, please describe in detail (include date of lien):

\_\_\_\_\_

\_\_\_\_\_

- e) When did you buy the property and for how much? Purchased: \_\_\_\_\_  
Price: \$ \_\_\_\_\_
- f) Is this your primary residence?  Yes  No
- g) Name all persons with an ownership interest in the property:

\_\_\_\_\_

\_\_\_\_\_

If you have interests in more than one property, please copy or reprint this page and provide the above information for each additional property.

## Your Personal Property

<u>Property Type</u>	<u>Description</u>	<u>Fair Market Value</u>	<u>Amount of liens</u> (may not apply to any property)	Who owns it? (Husband, Wife, alone or with another person?)
1. Cash on Hand				
2. Bank Accounts and Other Deposits of Money (include name of bank, and identify type of account (checking, savings, etc.))				
3. Security Deposits				
4. Household Goods, Supplies and Furnishings				
5. Books, Pictures, Art Objects; Stamp, Coin, and Other Collections				
6. Wearing Apparel				
7. Jewelry				
8. Firearms, Sports Equipment and Other Hobby Equipment				

## Your Personal Property

9. Interests in Insurance Policies				
10. Annuities				
11. Educational IRAs and/or qualified state tuition plans				
12. Pensions or Profit-Sharing Plans				
13. Stock and Interests in Incorporated and Unincorporated Companies				
14. Interests in Partnerships				
15. Government and Corporate Bonds and Other Negotiable and Non-Negotiable Instruments				
16. Accounts Receivable				
17. Family Support (to which you are or may be entitled receive), usually alimony or child support				

## Your Personal Property

18. Other Liquidated Debts Owning to You, Including Tax Refunds				
19. Equitable and Future Interests, Life Estates and Rights or Powers				
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.				
21. Other Contingent and Unliquidated Claims (including possible or pending lawsuits, personal injury claims, loans from you, etc.)				
22. Patents, Copyrights and Other Intellectual Property				
23. Licenses, Franchises and General Intangibles				
24. Customer lists or other compilations containing personally identifiable information provided to you in connection with obtaining product or service from you primarily for personal, family or household purposes				
25. Automobiles, Trucks, Trailers, and Other Vehicles				

## Your Personal Property

26. Boats, Motors, and Accessories				
27. Aircraft and Accessories				
28. Other Equipment Furnishings and Supplies				
29. Machinery, Fixtures, Equipment and Supplies				
30. Inventory				
31. Livestock, Poultry and Other Animals				
32. Crops				
33. Farming Equipment and Implements				
35. Farm Supplies				
37. Other Personal Property for which none of the above categories seem to apply				

## Secured Debts

**Secured** debts are debts where the creditor has an interest in the property (called “collateral”) such that if the debt is not paid the creditor could possibly repossess the collateral. Examples of secured loans include home loans (mortgages) and car loans.

**Unsecured** loans do not give the creditor the right to recover property if the debts are not paid. Examples of unsecured loans are credit cards, utility bills, medical bills, personal loans, etc. If you have copies of recent account bills/invoices containing the requested information, you may attach them to the worksheet rather than reprinting the information here.

<u>Debt type</u>	<u>Creditor Name and address</u>	<u>Amount of debt</u>	<u>Collateral</u>	<u>Date incurred</u>	<u>Name codebtors, if any</u>
Mortgage(s) on principal residence			principal residence		
			principal residence		
Car loan – please indicate the last scheduled payment date along with “date incurred”					
Other secured debts					

## Tax Debts

Federal Taxes	Description (income, withholding, capital gains, etc.)	Amount	Date incurred	Were returns filed? When?

State/Municipal Taxes	Description (income, withholding, capital gains, etc.)	Amount	Date incurred	Were returns filed? When?

## Unsecured Debts

**Unsecured** debts do not give the creditor the right to recover property if the debts are not paid. Examples of unsecured loans are credit cards, utility bills, medical bills, personal loans, etc. List all your unsecured debts. *Please Include Addresses.* If you have copies of recent account bills/invoices containing the requested information, you may attach them to the worksheet rather than reprinting the information here.

Creditor name and address	Debt amount	Describe debt (credit card, personal loan, medical, student loan, etc.)	Date incurred (for credit cards state last date charge incurred)	Name of codebtors, if any

## Unsecured Debts

Creditor name and address	Debt amount	Describe debt (credit card, personal loan, medical, student loan, etc.)	Date incurred (for credit cards state last date charge incurred)	Name of codebtors, if any

## Leases and Contracts

LEASES OR CONTRACTS: Are you a party to a contract or lease? Please describe including the type of lease or contract, the name and address of the other party to the contract or lease, and any other pertinent information:

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## Biographical Information

Husband

Wife

Date of Birth: \_\_\_\_\_

\_\_\_\_\_

Occupation: \_\_\_\_\_

\_\_\_\_\_

Employed Since?: \_\_\_\_\_

\_\_\_\_\_

Employer's Name: \_\_\_\_\_

\_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Dependants

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Income Sources

	<u>Husband</u>	<u>Wife</u>
Current monthly gross wages, salary, commissions (pro-rate if not paid monthly).		
Estimated monthly overtime		
Payroll Taxes and Social Security Deductions		
Insurance Deductions		
Union Dues		
Other Payroll Deductions – specify		
Regular monthly income from business, profession, or farm (attach detailed statement)		
Monthly income from real property		
Alimony, maintenance, or support payments (amount received by you monthly for yourself or a dependant)		
Social security or government assistance		
Pension or retirement		
Other Monthly Income		
Describe any increase or decrease of more than 10% in any previous category anticipated to occur in the year following this filing		

## Income Sources

You must indicate your combined gross income per month for the last 6 months. Income is calculated from the first day to the last day of each month. Please also include an estimate through the last day of the month in which you are completing this form.

Estimate total gross income this month (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual gross income last month (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual total gross income two months ago (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual total gross income three months ago (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual total gross income four months ago (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual total gross income five months ago (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

Actual total gross income six months ago (\_\_\_\_\_, 200\_\_):      \$ \_\_\_\_\_

## Expenses

Expense	Average Amount Monthly
Rent or home mortgage payment Does it include real estate taxes? Does it include property insurance?	
Electricity and heating fuel	
Water and sewer	
Telephone and/or cell phone	
Cable TV	
Internet Service Provider	
Home Maintenance	
Food	
Clothing	
Laundry and Dry Cleaning	
Medical and dental	
Transportation (not including car payment)	
Recreation, clubs, and entertainment, newspapers, etc.	
Charitable contributions	
Homeowner's or renter's insurance	
Life Insurance	
Health Insurance	
Auto Insurance	
Other Insurance – specify	
Taxes not deducted from wages or in home mortgage payments	
Installment auto payments	
Other installment payments	
Alimony, maintenance, and support paid by you to others	

## Expenses

Expense	Average Amount Monthly
Payments for dependants not living at your home	
Operation expenses of business, profession, or farm	
Other expenses	

Client Worksheet  
Statement of Financial Affairs

1. Income from employment or operation of business: Please provide separately amount earned to date this year, amount earned last year, and amount earned two years ago. Please indicate in your answer the source(s) of income and the years in which the income was earned.

<u>Husband</u>	Amount	Source (wages, salary, etc.)
This year to date:	_____	_____
	_____	_____
Last year:	_____	_____
	_____	_____
Two years ago:	_____	_____
	_____	_____

<u>Wife</u>	Amount	Source (wages, salary, etc.)
This year to date:	_____	_____
	_____	_____
Last year:	_____	_____
	_____	_____
Two years ago:	_____	_____
	_____	_____

2. Income from other than employment (social security, alimony, etc.):

<u>Husband</u>	Amount	Source (SSI, Alimony, etc.)
This year to date:	_____	_____
	_____	_____
Last year:	_____	_____
	_____	_____
Two years ago:	_____	_____
	_____	_____

Client Worksheet  
Statement of Financial Affairs

<u>Wife</u>	Amount	Source (SSI, Alimony, etc.)
This year to date:	_____	_____
	_____	_____
Last year:	_____	_____
	_____	_____
Two years ago:	_____	_____
	_____	_____

3a-b Describe payments to creditors of more than \$600.00 made within the last 90 days:

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3c. Describe payments made to family and partners during the last year:

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4a. Were you sued or did you sue anyone during the past year? If so, describe case in detail:

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4b. List all property garnished, attached, or seized within the past year?

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5. List any repossessions, foreclosures, and voluntary returns within the last year:

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Client Worksheet  
Statement of Financial Affairs

6a. Describe any assignment of property for the benefit of creditors within the last 120 days:

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6b. List all property that has been in the hands of a custodian, receiver, or court-appointed official during the past year:

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7. List all gifts or charitable contributions made during the past year except ordinary and usual gifts totaling less than \$200.00 to family/friends (\$100.00 or less per recipient)

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8. List all losses from fire, theft or gambling during the last year.

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9. Describe any payments for debt consultation (especially to attorneys) within the last year.

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10a. List all other property transfers, either absolutely or as security, within the last two years.

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10b. List all property transferred by you within ten years to a **self-settled trust or similar device** of which you are a beneficiary.

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Client Worksheet  
Statement of Financial Affairs

11. List all financial accounts that were closed or transferred within the last year.

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12. List each safe deposit box in which you have stored valuables within the last year.

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13. List all setoffs (money taken from an account to repay a loan at the same bank, for example) within the last 90 days.

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14. List all property **owned by another person** that you hold or control.

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15. If you have moved within the last three years, please provide dates and addresses of prior residences.

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Client Worksheet  
Statement of Financial Affairs

16. If you resided in a community property state (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington or Wisconsin) within the past eight years, identify the name of your spouse and any former spouse who you resided with in the community property state.

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17a. List the name and address of every site for which you have received notice that you may be liable or potentially liable under Environmental Law. Provide governmental unit, date of notice and the appropriate law.

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17b. List the name and address of every site for which you have provided notice to a governmental unit of a release of Hazardous Material. Provide governmental unit and date of notice.

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17c. List all judicial or administrative proceedings, including settlement or orders, under Environmental Law with respect to which you were a party. Provide the name and address of the governmental unit that is/was a party to the proceeding and the docket number.

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Client Worksheet  
Statement of Financial Affairs

18a. List the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

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18b. Identify any business listed in response to subdivision a., above, that is “single asset real estate” as defined in 11 U.S.C. § 101.

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19. Any other information that you believe your attorney should know.

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Note: Please do not hesitate to add sheets, including questions you may have.

Client Worksheet  
Statement of Financial Affairs

**Massachusetts and New Hampshire Approved Credit Counselors 2006**

Alliance Credit Counseling, Inc. (Mass and NH)  
15720 John J. Delaney Dr.  
Suite 100  
Charlotte, NC 28277-2747  
888-995-7856  
[www.knowdebt.org](http://www.knowdebt.org)  
in Person, Telephone/ Internet

Community Service Network Inc. (**Massachusetts Filers Only**)  
271 Main Street  
Suite 303  
Stoneham, MA 02180  
781-438-5981  
(In Person)

Consumer Credit Counseling Service of Greater Atlanta Inc. (Mass and NH)  
100 Edgewood Avenue  
Suite 1800  
Atlanta, GA 30303  
800-251-2227  
[www.cccsinc.org](http://www.cccsinc.org)  
In Person (*not available in all judicial districts*), Telephonic and Internet

Consumer Credit Counseling Service of NH & VT (**New Hampshire Filers Only**)  
105 Loudon Road, Bldg. #1  
Concord, NH 03301  
800-327-6778  
[www.cccsnh-vt.org](http://www.cccsnh-vt.org)  
In Person, and Telephonic

Consumer Credit Counseling Services of San Francisco (Mass and NH)  
150 Post Street, 5th Floor  
San Francisco, CA 94108  
800-777-7526  
[www.cccssf.org](http://www.cccssf.org)  
In Person (*not available in all judicial districts*), Telephonic and Internet

Credit Advisors Foundation (Mass and NH)  
1818 South 72nd Street  
Omaha, NE 68124  
800-942-9027  
[www.creditadvisors.org](http://www.creditadvisors.org)  
In Person (*not available in all judicial districts*), Telephonic, and Internet

Client Worksheet  
Statement of Financial Affairs

Credit Counseling Centers of America (Mass and NH)

9330 LBJ Freeway

Suite 900

Dallas, TX

75379-8039

800-493-2222

[www.cccamerica.org](http://www.cccamerica.org)

In Person (*not available in all judicial districts*), Telephonic and Internet

Garden State Consumer Credit Counseling, Inc. (Mass and NH)

225 Willowbrook Road

Freehold, NJ 07728

877-892-4557

[www.novadebt.org](http://www.novadebt.org)

In Person (*not available in all judicial districts*) & Telephonic

GreenPath, Inc. (Mass and NH)

38505 Country Club Drive, Suite 210

Farmington Hills, MI 48331-3429

800-630-6718

[www.greenpath.com](http://www.greenpath.com)

In Person (*not available in all judicial districts*), and Telephonic

Hummingbird Credit Counseling and Education, Inc. (Mass and NH)

3737 Glenwood Avenue

Suite 100-106

Raleigh, NC 27612

800-645-4959

[www.hbcce.org](http://www.hbcce.org)

Telephonic & Internet

Institute for Financial Literacy, Inc. (Mass and NH)

449 Forest Avenue

Suite 12

Portland, ME 04101

866-662-4932

[www.financiallit.org](http://www.financiallit.org)

Telephonic & Internet

Money Management International Inc. (Mass and NH)

9009 West Loop South

7<sup>th</sup> Floor

Houston, TX 77096-1719

877-918-2227

[www.moneymanagement.org](http://www.moneymanagement.org)

In Person (*not available in all judicial districts*), Telephonic and Internet

Client Worksheet  
Statement of Financial Affairs

Springboard Nonprofit Consumer Credit Management Inc. (Mass and NH)  
4351 Latham Street  
Riverside, CA 92501  
800-947-3752  
[www.credit.org](http://www.credit.org)  
In Person (*not available in all judicial districts*), Telephonic and Internet