



**A Message from the attorneys and staff of the Vida Law Firm:**

It is our goal as bankruptcy attorneys to help reduce your stress in working through the decision to file bankruptcy and the bankruptcy process. Choosing the right attorney for yourself is very important to your bankruptcy case. Clients generally have anxiety about providing all of their personal information to any attorney not knowing why that information is relevant or what the attorney will do with it. We assure you that the attorneys in this firm and our staff are sensitive to your need to understand what is happening with your case. Having accurate and detailed information from a client is one of the most important issues in a bankruptcy. Your success in bankruptcy depends upon your involvement.

**GENERAL QUESTIONS**

**Circle Y or N. On this page, the term “you,” refers to and includes both you and your spouse.**

1. **Y - N** Have you lived anywhere other than Texas in the last two years (730 days)? **If yes**, where and when: \_\_\_\_\_
2. **Y - N** Do you have any dependants living at home? **If yes**, list their ages, and relationship to you \_\_\_\_\_
3. **Y - N** Are you behind on child support or alimony? **If yes**, how much do you owe? \_\_\_\_\_  
How much are your monthly court ordered child support or alimony payments? \_\_\_\_\_
4. **Y - N** Have you ever filed bankruptcy? **If yes**, when and what chapter? \_\_\_\_\_  
Did you receive a discharge or was your case dismissed? \_\_\_\_\_
5. **Y - N** Have you transferred property to anyone in the past two years? (“Transfer” means to sell, give, or trade any real property (i.e., land, home, etc.) or personal property (i.e., vehicle, furniture, gun, etc.) to any person) \_\_\_\_\_  
**If yes**, what property? \_\_\_\_\_ To whom? \_\_\_\_\_
6. **Y - N** Is there anyone you could sue for money damages? **If yes**, who? \_\_\_\_\_  
Why? \_\_\_\_\_
7. **Y - N** Do you have an injury claim, auto accident claim, class action claim, medical malpractice claim, etc.? **If yes**, against whom? \_\_\_\_\_ Why? \_\_\_\_\_
8. **Y - N** Are you currently the beneficiary of a trust? **If yes**, explain \_\_\_\_\_
9. **Y - N** Are you an heir or beneficiary under any person’s will? **If yes**, is it in probate? \_\_\_\_\_
10. **Y - N** Are both of your parents living? If no, did the deceased parent(s) have a will? \_\_\_\_\_  
**If yes**, is there anything in the estate of the deceased parent(s) that has not been distributed \_\_\_\_\_
11. **Y - N** Do you owe any debt to any family members or friends? \_\_\_\_\_  
**If yes**, to whom? \_\_\_\_\_ How much? \_\_\_\_\_ Date of debt? \_\_\_\_\_
12. **Y - N** Have you made any payments to any family members or friends within one year of today? **If yes**, to whom? \_\_\_\_\_ How much? \_\_\_\_\_ Date(s) of payment (s)? \_\_\_\_\_
13. **Y - N** Within the past 90 days have you charged \$500.00 or more on a single credit card? \_\_\_\_\_
14. **Y - N** Within the past 90 days have you taken cash advances or written convenience checks totaling more than \$750? \_\_\_\_\_  
**If yes**, how much? \$ \_\_\_\_\_, Why? \_\_\_\_\_
15. **Y - N** Do you own, or have an interest in ANYTHING, other than your home, the content of your home, your vehicles, tools of your trade, and your retirement accounts? \_\_\_\_\_  
**If yes**, what and how much is it worth? \_\_\_\_\_
16. **Y - N** **Is First National Bank of Burleson one of your creditors?** \_\_\_\_\_

**EMPLOYMENT INFORMATION**

**Please note:** We request that you bring a copy of your last year’s income tax return and a copy of your two most recent pay stubs along with this client information sheet. If you are self-employed, please provide a year-to-date Profit and Loss Statement for your business.

Your Current Occupation                      How Long              Your Employer's Name                      Ful time or Part-time (circle one)

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Spouse's Current Occupation                      How Long              Spouse's Employer's Name                      Full time or Part-time (circle one)  
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Your SS# \_\_\_\_\_ Spouse’s SS# \_\_\_\_\_

**INCOME INFORMATION FOR YOU AND/or YOUR SPOUSE**

**Your Gross Income** (before deductions): \_\_\_\_\_ When do you get paid? Please circle answer:  
Monthly    Every other Week    Twice a Month    Weekly

**Spouse’s Gross Income** (before deductions): \_\_\_\_\_ When do you get paid? Please circle answer  
Monthly    Every other Week    Twice a Month    Weekly

Do you or your spouse get overtime or bonuses?    Yes \_\_\_ No \_\_\_    Amount \$ \_\_\_\_\_  
Explain: \_\_\_\_\_

Do you or your spouse receive Social Security Benefits    Yes \_\_\_ No \_\_\_    Amount \$ \_\_\_\_\_  
Explain: \_\_\_\_\_

Do you or your spouse receive a Retirement or Pension    Yes \_\_\_ No \_\_\_    Amount \$ \_\_\_\_\_  
Explain: \_\_\_\_\_

Do you or your spouse pay or receive Child Support?    Yes \_\_\_ No \_\_\_    Amount \$ \_\_\_\_\_  
Explain: \_\_\_\_\_

Do you or your spouse receive any Rental Income?    Yes \_\_\_ No \_\_\_    Amount \$ \_\_\_\_\_  
Explain: \_\_\_\_\_

Do you or your spouse have any other income (VA, Royalties, Trust)?    Yes \_\_\_ No \_\_\_  
Explain: \_\_\_\_\_ Amount \$ \_\_\_\_\_

**QUESTIONS REGARDING YOUR DEBTS**

**YOUR HOME/PROPERTY INFORMATION**

**IS YOUR HOME POSTED FOR FORECLOSURE?** Y N If so, when \_\_\_\_\_

**Home Mortgage Company Name (1<sup>st</sup> lien):** \_\_\_\_\_

What's the value of your Home? \_\_\_\_\_

What are Monthly Payment? \_\_\_\_\_ Are you behind? \_\_\_\_\_ If yes, how many months? \_\_\_\_\_

Do you want to keep your home? \_\_\_\_\_ How much is the pay-off? \_\_\_\_\_

Are taxes and insurance included in your home payment? \_\_\_\_\_

Is your home a manufactured home? \_\_\_\_\_ If yes, do rent or own the land? \_\_\_\_\_

If you own the land, are you buying it under a mortgage, a contract for deed, or other? \_\_\_\_\_

**Home Mortgage Company Name (2<sup>nd</sup> lien):** \_\_\_\_\_

What are Monthly Payment? \_\_\_\_\_ Are you behind? \_\_\_\_\_ If yes, how many months? \_\_\_\_\_

How much is the pay off? \_\_\_\_\_

**Do you own any rental property?** Y N Lien Holder \_\_\_\_\_ Monthly Payments: \_\_\_\_\_

Are you behind? \_\_\_\_\_ If yes, how many months? \_\_\_\_\_ ANY FORECLOSURE ISSUES Y N

**YOUR VEHICLE INFORMATION**

**ARE ANY OF YOU VEHICLES IN DANGER OF BEING REPOSSESSED** Y N

**1<sup>st</sup> Vehicle:** Creditor Name: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Miles: \_\_\_\_\_ Pay off: \_\_\_\_\_ Interest Rate: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

# of payments by contract? \_\_\_\_\_ Are you behind? \_\_\_\_\_ If yes, how many months? \_\_\_\_\_ Do you want to keep car/truck? Y /N

**2<sup>nd</sup> Vehicle:** Creditor Name: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Miles: \_\_\_\_\_ Pay off: \_\_\_\_\_ Interest Rate: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

# of payments by contract? \_\_\_\_\_ Are you behind? \_\_\_\_\_ If yes, how many months? \_\_\_\_\_ Do you want to keep car/truck? Y /N

**Do you have more than 2 vehicles?** If so, please provide information \_\_\_\_\_

Do you own any other vehicles that are paid for? Y - N If yes, provide: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Fair market value: \_\_\_\_\_

**OTHER CREDITOR INFOMATION**

**Do you have any creditors whose claims are secured by a collateral such as recreational vehicle, furniture, appliances, above ground pool, stocks, bonds, etc.?** Y - N If yes, for each creditor provide:

Creditor: \_\_\_\_\_ Collateral: \_\_\_\_\_ Total Debt: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Interest: \_\_\_\_\_ Want to Keep? \_\_\_\_\_

Creditor: \_\_\_\_\_ Collateral: \_\_\_\_\_ Total Debt: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Interest: \_\_\_\_\_ Want to Keep? \_\_\_\_\_

**Taxes owed:** (circle where appropriate)

<b>Creditor</b>	<b>Type of tax</b>	<b>Year/Quarter</b>	<b>Amount Due</b>	<b>Lien filed</b>
IRS	1040, 940, 941, other	_____	\$ _____	Yes - No
IRS	1040, 940, 941, other	_____	\$ _____	Yes - No
IRS	1040, 940, 941, other	_____	\$ _____	Yes - No
State	sales, other	_____	\$ _____	Yes - No
County/City/ISD	real, personal, other	_____	\$ _____	Yes - No

Have you filed all income tax returns that are due? \_\_\_\_\_ If no, what years have you not filed? \_\_\_\_\_

**Estimated total of all other debts:** Personal loans from Friends & Family:\$ \_\_\_\_\_ Student Loans:\$ \_\_\_\_\_

Credit cards: \$ \_\_\_\_\_ Judgments: \$ \_\_\_\_\_ Medical bills: \$ \_\_\_\_\_ Signature loans: \$ \_\_\_\_\_

**ANY other debts or claims against you not listed above?** Please list the amount and explain the debt/claim. \_\_\_\_\_