

Hedback, Arendt & Carlson, PLLC
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(612) 436-3280

John A. Hedback
Bankruptcy Interview Form

1. Client's name: _____ Spouse: _____
Client's age _____ Spouse's age _____
Address: _____ Address: _____

County: _____ County: _____
Phone: (____) _____ Phone: _____
Children:
(List their names and ages)

Length of time at above address: _____

Addresses, names used, and dates for last two years:

Other names in the last six years:

Social Security No. _____ - _____ - _____ Spouse No. _____ - _____ - _____

Creditor Information

6. a. Unsecured Creditors information (see attached sheet)
b. Secured Creditors information (see attached sheet)

Category of Property

Liquidation Value

(Put detailed description where indicated)

- 7. a. Real Property: ___yes ___no\$
(attach correct legal description)
- b. Cash on hand\$
- c. Bank name and address for checking account.....\$

Bank names and address for saving account.....\$
- d. Security deposits public utilities, landlords\$
- e. Household goods and furnishings\$
Collectables
- f. Books, pictures,\$
Computers
- g. Clothing\$
- h. Furs and jewelry\$
- i. Firearms, sports, and other hobby equip.\$
- j. Interests in insurance policies\$
- k. Annuities.....\$
- l. Interests in IRA, ERISA, Keogh plans, 401k.....\$
- m. Accounts receivable.....\$
- n. Alimony, maintenance, support payments\$
- o. Other liquidated debts.....\$
- p. Equitable, future, or life estates\$
- q. Patents, copyrights, licenses, franchises\$
- r. Autos, trucks, trailers, and other vehicles
1. _____Year_____Make/Model\$
2. _____Year_____Make/Model\$
3. _____Year_____Make/Model\$
- s. Boats, motors, aircraft and accessories.....\$
- t. Office equipment, furnishings, and supplies.....\$
- u. Machinery, fixtures, equipment, Inventory\$
- v. Animals.....\$
- w. Crops, farm equipment, feed.....\$
- x. Other personal property not listed, i.e. tools\$
- y. Tax refund\$
- z. Stocks bonds\$

Gross Income

Debtor/Spouse

| | | |
|---|----------|----------|
| ___ Monthly, ___ weekly, ___ bi-weekly income | \$ _____ | \$ _____ |
| Overtime wages | \$ _____ | \$ _____ |
| Deductions | \$ _____ | \$ _____ |
| Any other income (employer, pension, social security)..... | \$ _____ | \$ _____ |
| Do you received any child support ___yes ___ no | \$ _____ | \$ _____ |
| Name, age, of dependents living with you:_____ | | |

Personal Monthly Expenses

| | |
|--|----------|
| a. Monthly ___Rent ___ Mortgage payments | \$ _____ |
| b. Home maintenance..... | \$ _____ |
| c. Electricity and heating fuel | \$ _____ |
| d. Water and sewer | \$ _____ |
| e. Telephone | \$ _____ |
| f. Garbage | \$ _____ |
| g. Security | \$ _____ |
| h. Cable | \$ _____ |
| i. Other Utilities | \$ _____ |
| j. Food | \$ _____ |
| k. Clothing | \$ _____ |
| l. Laundry/Dry Cleaning | \$ _____ |
| m. Medical/dental | \$ _____ |
| n. Transportation..... | \$ _____ |
| o. Recreation/entertainment | \$ _____ |
| p. Charitable contribution | \$ _____ |
| q. Homeowner or renter insurance..... | \$ _____ |
| r. Life insurance | \$ _____ |
| s. Health insurance | \$ _____ |
| t. Auto insurance | \$ _____ |
| u. Other insurance | \$ _____ |
| v. Real estate taxes..... | \$ _____ |
| w. Other taxes | \$ _____ |
| x. Auto installments | \$ _____ |
| y. Other installments | \$ _____ |
| z. Child support payments..... | \$ _____ |
| aa. Spousal support paid | \$ _____ |
| bb. Payments for dependants not living at home | \$ _____ |
| cc. Other expenses | \$ _____ |

Total Monthly Income \$ _____ (If not roughly equal, may need to do Ch. 13)

Total Monthly Expenses \$ _____

Employment Information

9. Debtor: Spouse:
Employers Name: _____ Employers Name: _____
Address: _____ Address: _____
Phone no. _____ Phone no. _____
Position: _____ Position _____
Length of time employed _____ Length of time employed _____

_____ Self-employed _____ in business: please list name and address of business and how long in business

Gross Income Information

10. Debtor: Spouse:
Current Year: _____ Current Year: _____
Source: _____ Source: _____
Amount: _____ Amount: _____

Year: _____ Year: _____
Source: _____ Source: _____
Amount: _____ Amount: _____

Year: _____ Year: _____
Source: _____ Source: _____
Amount: _____ Amount: _____

11. Describe Any of the Following Below:

- a. Lawsuit or judgments (describe)
- b. Attached, garnishment, or seizure
- c. Property return, repossession, or foreclosure
- d. Assignment
- e. Receivership
- f. Gift or contribution
- g. Loss
- h. Attorney
- i. Transfer
- j. Accounts closed
- k. Safe deposit box
- l. Setoff
- m. Property held for another
- n. Executory contract, lease, etc.
- o. Codebtor (describe)

12. Has debtor(s) used credit cards within 60 days? _____ yes _____ no (If yes, debt may not be dischargeable)

Engaged in Business

13. Name of person who kept books for you _____

14. Name and address of person doing audit in last six years _____

15. Name and address of person who has records _____

16. Describe any financial statements _____

17. Describe the last two inventories _____

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Information to Bring to your Lawyer

1. A copy of each bill (whether secured or unsecured).
2. If collection agencies or attorneys are involved, bring all correspondence or other documents from them.
3. List of co-signers names and addresses.
4. If you own or are buying real estate, please provide a copy of your deed, abstract and the most recent real estate tax statement.
5. Your last two years income tax returns.
6. Your paycheck stubs for the last 6 months.

THERE WILL BE OTHER DOCUMENTATION NEEDED, THIS LIST IS NOT EVERYTHING YOU WILL NEED.