Client Questionnaire for Non-Business Debtor

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Section 1 Basic Information

Part A. Name and Address

Name:		
Last	First	Middle
Telephone Number Ho	ome:\	Work:
Have you used any other	names in the past eight years? _	NoYes if yes, list other name
Social Security Number: _		
Address:		
City:	State:	Zip:
If you have a different ma		or at least 180 days?NoYe
City:	State:	Zip:
If you are filing jointly with	and Address of Spouse n your spouse, fill in the following in	
Name:	First	Middle
Has your spouse used any names:	y other names in the past eight ye	ears?NoYes if yes, list other
Social Security Number: _		
Address: (if different from you	r address):	
City:	State:	Zip: County:
If your spouse has a differ	rent mailing address, please list:	
Mailing Address: _		

	:			
Part	t C. Prior/Pending Bar	kruptcy Case	S	
Has a bankr	ruptcy case been filed by	you or against yo	ou in the last eight years?_	NoYes
If ye	es, in which district of which	state was the ca	ase filed?	
Case	e Number:	Date f	iled:	
Are there cu	urrently any bankruptcy ca	ases pending aga	ainst you, your business, yo	ur spouse, or
Your spouse	e's business No	Yes		
If ye	es, name of debtor:		Relationship to you:	
Case	e Number:		Date filed:	
Judo	ge:		in which district of whi	ch state was the
Case	e filed?			
poses or is a	" to the Voluntary Peti alleged to pose a threat of Yes (If yes, please attach a list	imminent and id	lentifiable harm to public h	

Section 2 Property

Part A. Real Estate (Schedule A)
List all real estate which you own or are a joint owner of, even if you still owe money on the property.

1) Address and description	of prop	erty:		
City:		State:	Zip:	
Owned by Husband, Wife,	Joint or	Community?		
Current market value:		_ your % ownership, or \$ amou	unt, if you and spouse are not	sole owners
First Mortgage Creditor: A	mount o	f Secured Claim \$	Date Incurred:	
Name:		Acco	ount Number	
Address:		City:	State:	Zip:
Second Mortgage Credito	r: Amou	nt of Secured Claim \$	Date Incurre	ed:
Name:		Acco	ount Number	
Address:Co-Debtor/Additional Noti		City:	State:	Zip:
Name:	Ac	ddress:		
Retain/Reaffirm	or	<u>Surrender</u>	property.	
2) Address and description	ı of prop	erty:		
City:		State:	Zip:	
Owned by Husband, Wife,	Joint or	Community?		
Current market value:		_ your % ownership, or \$ amou	unt, if you and spouse are not	t sole owners
Secured Creditor: Amount	t of Secu	red Claim \$	Date Incurred:	
Name:		Acco	ount Number	
Address:Co-Debtor/Additional Noti		City:	State:	Zip:
Name:	Ac	ddress:		
Retain/Reaffirm	or	<u>Surrender</u>	property.	

Part B. Personal Property (Schedule B)
For each type of property listed below, fill in the information. You can think of the market value as the resale value.

PERSONAL PROPERTY

1. Cash on hand. Amount	\$	
2. Checking/Savings Account,	Certificates of deposit, other bank a	accounts.
a) Bank Name	Account #	Amount
b) Bank Name	Account #	Amount \$
c) Bank Name	Account #	Amount \$
d) Bank Name	Account #	Amount \$
3. Security Deposits held by utili	ty companies, landlord.	
a) Name	Account #	Amount \$
b) Name	Account #	Amount \$
c) Name	Account #	Amount \$
4. Household goods, furniture, in	ncluding audio, video and compute	er equipment.
Description		
		Amount \$
5. Books, pictures, art objects, re	ecords, compact disc, collectibles.	
Description		
		Amount \$
6. Clothing.		Amount \$
7. Furs and Jewelry.		
Description		Amount \$
8. Sports, photographic, hobby	equipment, firearms.	
Description		Amount \$

9. Interest in insurance po	licies-specify refund or cancellation	n value.	
a) Name	Account #	Amount \$	-
b) Name	Account #	Amount \$	
c) Name	Account #	Amount \$	-
10. Annuities.			
Name	Account #	Amount \$	
11. Interest in pension or p	profit sharing plans.		
a) Type of Plan	Name	Amount \$	-
b) Type of Plan	Name	Amount \$	-
12. Stock and interests in i	ncorporated/unincorporated busin	ess.	
a) Name		Amount \$	-
b) Name		Amount \$	-
c) Name		Amount \$	
13. Interest in partnerships	s/joint ventures.		
Description		Amount \$	-
14. Bonds.			
Description		Amount \$	-
15. Accounts Receivable.			
a) Name		Amount \$	-
16. Alimony/family suppor	t to which you are entitled.		
a) Description		Amount \$	-
b) Description		Amount \$	-
17. Other liquidated debt	s owed to you, including tax refund	S.	
a) Description		Amount \$	-
h) Description		Amount \$	

18. Equitable or future interests or life	e estates.		
a) Description		Amount \$	
b) Description		Amount \$	
19. Interests in estate of descendent	or life insurance plan	or trust.	
a) Description		Amount \$	
b) Description		Amount \$	
20. Other contingent/un-liquidated	claims, including tax re	funds, counterclaims.	
a) Description		Amount \$	
b) Description		Amount \$	
21. Patents, copyrights, and other in	tellectual property.		
a) Description		Amount \$	
b) Description		Amount \$	
22. Licenses, franchises.			
a) Description		Amount \$	
b) Description		Amount \$	
23. Automobiles, trucks, trailers, and	accessories.		
a) Year Make	Model	Amount \$	
Secured Creditor: Amount of Secure	ed Claim:	Date Incurred:	
Name:	Acc	ount Number	
Address:Co-Debtor/Additional Notice:	City:	State:	Zip:
Name:Add	dress:		
Retain/Reaffirm or	<u>Surrender</u>	property.	

b) Year Make _		Model	Amount \$		
Secured Creditor: Amoun	ured Creditor: Amount of Secured Claim:		Date Incurred:		
Name:		A	ccount Number		
Address:Co-Debtor/Additional Not		City:	State:	Zip:	
Name:	A	ddress:			
Retain/Reaffirm	or	<u>Surrender</u>	property.		
c) Year Make _		Model	Amount \$		
Secured Creditor: Amoun	ıt of Secu	ıred Claim:	Date Incurred	:	
Name:		A	ccount Number		
Address:Co-Debtor/Additional Not		City:	State:	Zip:	
Name:	A	ddress:			
Retain/Reaffirm	or	<u>Surrender</u>	property.		
25. Aircraft and accessorie	es.				
a) Description			Amount \$		
b) Description			Amount \$		
26. Office equipment, sup	plies.				
a) Description			Amount \$		
b) Description			Amount \$		
27. Machinery, fixtures etc	: for busi	ness.			
a) Description			Amount \$		
b) Description			Amount \$		
28. Inventory.					
a) Description			Amount \$		
b) Description			Amount \$		

29. Animals.	
a) Description	Amount \$
b) Description	Amount \$
30. Crops - growing or harvested.	
a) Description	Amount \$
b) Description	Amount \$
31. Farming equipment and implements.	
a) Description	Amount \$
b) Description	Amount \$
32. Farm supplies, chemicals, feed.	
a) Description	Amount \$
b) Description	Amount \$
33. Other personal property of any kind not listed.	
a) Description	Amount \$
b) Description	Amount \$
c) Description	Amount \$
d) Description	Amount \$
e) Description	Amount \$
f) Description	Amount \$
g) Description	Amount \$
h) Description	Amount \$
I) Description	Amount \$
j) Description	Amount \$
k) Description	Amount \$

Section 3 Debts

List below all debts that you owe, or that creditor's claim that you owe. (Other than those previously listed)

Bank Loans (other than mortgage and auto)

a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amoun	t Owed: \$
Reason for Loan:			
Co-Debtor/Additional Notice:			
Is debt secured by any property?_			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Owed: \$
Reason for Loan:			
Co-Debtor/Additional Notice:			
Is debt secured by any property? _			
c) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Owed: \$
Reason for Loan:			
Co-Debtor/Additional Notice:			
Is debt secured by any property? _			
d) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Owed:
Reason for Loan:			
Co-Debtor/Additional Notice:			
Is debt secured by any property? _			

Personal loans

a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Reason for Loan:			
Co-Debtor/Additional Notice:			
ls debt secured by any property? _			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when c	debt was incurred:	Amount (Dwed: \$
Reason for Loan:			
Co-Debtor/Additional Notice:			
Is debt secured by any property? _ Student loans			
a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?_			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount C	Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			

Major credit card debts (Visa, Am Ex, Master Card, Discover)

a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when debt was incurred:		Amount (Owed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	lebt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
c) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	lebt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
d) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	lebt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
e) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	lebt was incurred:	Amount (Owed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			

Department store credit card debts

a) Creditor's Name:		Account #:	
Address:	City	State	Zip Code
Date/range of dates when debt was incurred:		Amount (Owed: \$
Reason for Debt:			
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when de	ebt was incurred:	Amount (Owed: \$
Reason for Debt:			
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
c) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when de	ebt was incurred:	Amount Owed: \$	
Reason for Debt:			
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
d) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when de	ebt was incurred:	Amount (Owed: \$
Reason for Debt:			
Co-Debtor/Additional Notice:			
Is debt secured by any property?			

e) Creditor's Name:		Account #:		
Address:	City	State	Zip Code	
Date/range of dates when dek	ot was incurred:	Amount C	Owed: \$	
Reason for Debt:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
Other credit card debts (Gas card)	ards, phone cards, etc	.)		
a) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when del	ot was incurred:	Amount C	Dwed: \$	
Reason for Debt:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
b) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when del	ot was incurred:	Amount C	Dwed: \$	
Reason for Debt:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
c) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when del	ot was incurred:	Amount C	Dwed: \$	
Reason for Debt:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				

	Account	#:
City	State	Zip Code
ebt was incurred:	Amount (Dwed: \$
	Account	#:
City	State	Zip Code
ebt was incurred:	Amount (Owed: \$
	Account	#:
City	State	Zip Code
ebt was incurred:	Amount (Dwed: \$
	Account	#:
City	State	Zip Code
ebt was incurred:	Amount (Dwed: \$
	City	Account

c) Creditor's Name:		Account #:		
Address:	City	State	Zip Code	
Date/range of dates when debt	was incurred:	Amount C	Owed: \$	
Medical Condition:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
d) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when debt	was incurred:	Amount Owed: \$		
Medical Condition:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
e) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when debt	was incurred:	Amount C	Owed: \$	
Medical Condition:				
Co-Debtor/Additional Notice:				
Is debt secured by any property?				
Unpaid Utility bills				
a) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when debt	was incurred:	Amount C)wed: \$	
Co-Debtor/Additional Notice:				
b) Creditor's Name:		Account	#:	
Address:	City	State	Zip Code	
Date/range of dates when debt	was incurred:	Amount C	Owed: \$	
Co-Debtor/Additional Notice:				

Unpaid rent

a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?_			
Unpaid Taxes a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?_			
b) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?_			
Unpaid alimony or child sup	port		
a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice: Unpaid service fees			
a) Creditor's Name:		Account	#:
Address:	City	State	Zip Code
Date/range of dates when o	debt was incurred:	Amount (Dwed: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property? _			

Reason for Service:All other unpaid debts/bills			
a) Creditor's Name:		Account #:	
Address:	City	_ State	_ Zip Code
Date/range of dates when debt was	incurred:	Amount Owed	: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
Reason for Debt:			
b) Creditor's Name:		Account #:	
Address:	City	_ State	_ Zip Code
Date/range of dates when debt was	incurred:	Amount Owed	: \$
Co-Debtor/Additional Notice:			
Is debt secured by any property?			
Reason for Debt:			

Section 4 Unexpired Leases and Contracts (Schedule G)

List below any current leases or contracts that you are a party to. Include residential, car and business leases, and service or business contracts.

1) Nature and Description of Contract:
Name and Address of Other Party or Parties:
Date that Contract Expires:
2) Nature and Description of Contract:
Name and Address of Other Party or Parties:
Date that Contract Expires:
3) Nature and Description of Contract:
Name and Address of Other Party or Parties:
Date that Contract Expires:
4) Nature and Description of Contract:
Name and Address of Other Party or Parties:
Date that Contract Expires:
5) Nature and Description of Contract:
Name and Address of Other Party or Parties:
Date that Contract Expires:

Section 5 Current Income Marital Status: _____ Married _____Single _____Divorced _____Separated _____Widowed List all dependents of you and your spouse, their ages, and their relationship to you: 1) Name______ Age _____ Relationship______ 2) Name______ Age _____ Relationship______ 3) Name Age Relationship 4) Name_____ Age ____ Relationship_____ _____ Age ____ Relationship_____ 5) Name_____ Part A. Debtor's Income 1) What is your occupation? __ 2) Name and address of your employer: ______ City State Zip 3) How long have you been employed there? ______ 4) What is the gross amount of your paycheck, before taxes, other deductions are taken out? 5) How often do you get paid? ____weekly ___every two weeks ___twice a month ___monthly 6) Do you receive overtime pay outside of your salary? If so, how much per month? \$_____ 7) How much is taken out of each paycheck for taxes and social security? \$______ 8) How much is taken out for insurance? \$_______9) Union Dues? \$______ 10) Are there other deductions? If so, what are they and how much? Do you receive? a) Income from business operations outside of your regular paycheck listed above? If so, what Is the business and how much do you receive per month? _____ b) Income from real estate property? If so, how much per month? \$______ c) Interest or dividends? If so, how much per month? \$_____ d) Alimony or family support payments for your use or for the care of your dependents? If so,

e) Social security or other forms of monetary government assistance? If so, how much per

How much per month? \$_____

Month? \$			
f) Retirement or pension money? If so, how m	uch per month? \$		
Do you have any other sources of income no Part B. Joint Debtor's Income 1) What is your occupation?			
2) Name and address of your employer:			
	City	State	Zip
3) How long employed there?			
4) What is the gross amount of your paycheck	x, before taxes/other o	deductions?	
5) How often do you get paid?weekly	_every two weeks	twice a month	monthly
6) Do you receive overtime pay outside of your lf so, how much per month? \$			-
7) How much is taken out of each paycheck	for taxes and social se	ecurity? \$	
8) How much is taken out for insurance? \$	9) Ur	ion Dues? \$	
10) Are there other deductions? If so, what ar	e they and how much	າ?	
Do you receive? a) Income from business operations outside o	f your regular payche	ck listed above	? If so, what
Is the business and how much do you receive	per month?		
b) Income from real estate property? If so, ho	ow much per month?	\$	
c) Interest or dividends? If so, how much per r	month? \$		
d) Alimony or family support payments for you	ır use or for the care o	of your depende	ents? If so,
How much per month? \$			
e) Social security or other forms of monetary of If so, how much per month? \$			
f) Retirement or pension money? If so, how m	uch per month? \$		
Do you have any other sources of income no	t listed?		
Are you expecting any increase or decrease	in salary of more than	10% next	
year? If so, explain			

Section 6 Current Expenses

Do you and your spouse maintain separate households?NoYe out for your household and another for your spouse's.	es. If so, fill one page
The following questions ask for your expenses each month. If you are unspay each month, but know the amount for a different period (per week, months, etc.,), write in the amount and the frequency that you pay the a	per day, every 2
Indicate how much you pay for each item each month	
1. Your rent or your home mortgage	\$
Does that amount include real estate taxes?No	_ Yes
Does it include property insurance?No	Yes
2. Electricity and heating	\$
3. Water and sewage	\$
4. Telephone service/long distance	\$
5. Do you have any other utility bills? If so, what, and how much p	per month?
	\$
	\$
6. Home maintenance, including repairs and general upkeep	\$
7. Food	\$
8. Clothing	\$
9. Laundry and dry cleaning	\$
10. Medical and dental expenses	\$
11. Transportation (not including car payments)	\$
12. Entertainment, recreation, newspapers, magazines	\$

13. Charitable contributions

14. Insurance not deducted from paychecka) Homeowner's or renter's insurance	\$
b) Life insurance	\$
c) Health insurance	\$
d) Auto insurance	\$
e) Other insurance	\$
15. Taxes not deducted from paycheck	\$
16. Installment payments for car, furniture, etc. (Specify)	
	\$
	\$
17. Alimony, maintenance, support paid to others	\$
18. Payments for support of dependents not living at home	\$
19. Expenses from operation of business	\$
20. Other expenses not listed above	\$
	\$

Section 7 Statement of Financial Affairs

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under chapter 12 or 13, and you are married and not separated, you must provide information about you spouse even if you are not filing jointly.

If you have no information to report for a question, check ANONE@.

Name and address of Creditor

/ear: <u>2013</u>	Amount:	Source:		
	Husband/Wife		(Name of Employer)	
/ear: <u>2012</u>	Amount:	Source:		
	Husband/Wife		(Name of Employer)	
/ear: <u>2011</u>	Amount:	Source:		
<u>Spouse</u>	Husband/Wife		(Name of Employer)	
/ear: <u>2013</u>	Amount: Husband/Wife	Source:	 (Name of Employer)	
/ear: <u>2012</u>	Amount: Husband/Wife	Source:	(Name of Employer)	
/ear: <u>2011</u>	Amount: Husband/Wife	Source:	(Name of Employer)	
2. Inc	come other than from emp	loyment or operatio	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
/ear: <u>2013</u>	Amount:	Source:		
	Husband/Wife			
	Amount: Husband/Wife	Source:		
/ear: <u>2012</u>	HUSDAHO/ WILE			
/ear: <u>2012</u> /ear: <u>2011</u>	Amount:	Source:		
		Source:		
/ear: <u>2011</u> 3. Pa	Amount: Husband/Wife) lyments to creditors			
/ear: <u>2011</u> 3. Pa a) Lis	Amount: Husband/Wife) syments to creditors at all payments on loans, ins	stallment purchases	of goods or services, and other del	
/ear: <u>2011</u> 3. Pa a) Lis total	Amount: Husband/Wife) syments to creditors at all payments on loans, ins	stallment purchases creditor, made with	of goods or services, and other del nin 90 days immediately preceding	
/ear: <u>2011</u> 3. Pa a) Lis total	Amount: Husband/Wife) syments to creditors st all payments on loans, insing more than \$600 to any	stallment purchases creditor, made with	of goods or services, and other del nin 90 days immediately preceding	

Dates of Payments

Amount Due

Name and address of Creditor/Relationship	Dates of Payments	Amount Amount Due
Name and address of Creditor/Relationship	Dates of Payments	Amount Amount Due
4. Suits, executions, garnishments and at a. List all suits and administrative proceed one year preceding the filing of this case Caption of Suit and Case Number Nature of Proceeding	dings to which you are	. 3
b. Describe all property that has been gasequitable process within one year immecase NONE Name and Address of Person/Company for Whom the Property Was Seized (Credi	diately preceding the o	commencement of this Description
5. Repossessions, foreclosures, and return List all property that has been repossesse transferred through a deed in lieu of fore immediately preceding the commencer Name and Address of Creditor	ed by a creditor, sold a eclosure, or returned to	the seller, within one yea NONE Description and
6. Assignments and receiverships a) Describe any assignment of property immediately preceding the commencer		tors made within 120 day NONE

b) List all property vappointed official vase NONE				eceiver, or court- emmencement of this
Name and Ado of Custodian		e and location of C e Title and Number	ourt, Date o Order	f Description and Value of Property
7. Gifts List all gifts or charit commencement o aggregating less th contributions aggre	f this case exce an \$200 in valu	ept ordinary and ue per individua	d usual gifts to fa I family member	and charitable
Name and Address of Recipient	Relationship to	o You, if Any	Date of Gift	Description and Value of Gif
8. Losses List all losses from fir preceding the com NONE Description and Value of Property	nmencement c		nce the commen	e year immediately ncement of this case. Date of Loss
9. Payments related List all payments mapersons, including a the bankruptcy law immediately prece	ade or propert attorneys, for c or preparatio	y transferred by onsultation con n of a petition ir	or on behalf of cerning debt con bankruptcy with he case N	nsolidation, relief unde thin one year
of Payee	Payment	Who Paid, if No		alue of Property

	nan property transferred in ther absolutely or as securi	the ordinary course of business or ity within one year immediately NE
Name and Address of Transferee and Relationship to you	Date of Transfer	Description of Property Transferred and Value Received
	d instruments held in your n se transferred within one y e	name or for your benefit which ear immediately preceding the
Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing
or other valuables within one NONE Name and Address of Name a	year immediately preced	ch you have had securities, cash, ing commencement of this case. Corription Date of of Contents Transfer, if Any
13. Setoffs List all setoffs made by any curvithin 90 days preceding the		gainst a debt or deposit of yours ase NONE
Name and Address of Creditor	Date of Setoff	Amount of Setoff
14. Property held for another List all property that you hold		y another person NONE
Name and Address of Owner	Description and Value of Proper	rty Location of Property

15. Prior address of debtor If you have moved within this case, list all residencesNONE	the two years immedia		
Address Your	Name at the Time	Dates	of Occupancy
16. Spouses and Former Sp If you reside or resided in a (including Alaska, Arizona, Rico, Texas, Washington, of the commencement of the spouse who resides or resides	a community property s California, Idaho, Louis or Wisconsin) within the e case, identify the nai	iana, Nevada, New Mo six-year period immedi me of your spouse and	exico, Puerto ately preceding of any former
Name			
17. Environmental Informa Fort the purpose of this qualified to, statutes or regulaterial. ASite@ means any location whether or not presently of limited to, disposal sites. AHazardous Material@ measubstance, toxic substance under the Environmental La) List the name and address governmental Law. Indication in the Environmental Law.	estion, the following deans any federal, state, or releases of hazardous or releases of hazardous or releases of hazardous or regulating the confidence of the formerly owned or opens anything defined are, hazardous material, naw. Tess of every site for which may be liable or potentiate the governmental of the results.	or local statute or regular toxic substances, was record to toxic substances, was record to the substance of these substances and the substance of the substanc	ites or material uding, but not not noes, wastes, or vironmental Law, noluding, but not eardous ant or similar term in writing by a iolation of an
Site Name and Address	Name and Address of Governmental Unit	Date of NoticeLaw	Environmental
b) List the name and addr governmental unit of a rel which the notice was sent	ease of Hazardous Mat and the date of the no	erial. Indicate the gov otice NONE	ernmental unit to
Site Name and Address	Name and Address of Governmental Unit	Date of NoticeLaw	Environmental

c) List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which you are or were a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number NONE					
Name and Ad Governmenta			Docket Number	Status or Disposition	
18. Nature,	location and na	ame of busine	SS		
numbers, nawhich the corporation the six year debtor own	ature of the bus debtor was an c n, partnership, so rs immediately p ned 5 percent o	inesses, and b officer, directo ble proprietors preceding the r more of the	eginning and ending r, partner, or managin hip, or was a self-emp commencement of t	es, taxpayer identification dates of all businesses in g executive of a loyed professional within his case, or in which the ties within the six years	
nature of the	ne businesses, ar s a partner or ov	nd beginning vned 5 percer			
nature of the	ne businesses, ar s a partner or ov	nd beginning vned 5 percer	and ending dates of a	ver identification numbers, all businesses in which the g or equity securities within his case NONE	
Name	Taxpayer I D Number	Address	Nature of Business	Beginning and End Dates of Operation	
	any business liste		to subdivision a., abo	ve, that is asingle asset real	
Name		Address			