

CLIENT NAME: _____

APPOINTMENT DATE/TIME: _____

HOME PHONE# _____ MR CELL# _____ MRS. CELL# _____

*PLEASE FULLY COMPLETE THIS GENERAL INFORMATION SECTION AND ALL OF THE ATTACHED DOCUMENTS SO THAT MR. SIGMON HAS ALL OF THE INFORMATION HE WILL NEED TO ADVISE YOU FULLY-IF YOU DO NOT FILL THIS PAPERWORK OUT COMPLETELY WE WILL HAVE TO RESCHEDULE YOU

GENERAL INFORMATION

HUSBAND'S FULL NAME _____

WIFE'S FULL NAME _____

HUSBAND'S ADDRESS _____

WIFE'S ADDRESS (IF DIFFERENT) _____

HUSBAND'S EMPLOYER _____

WIFE'S EMPLOYER _____

HUSBAND'S WORK PHONE # _____

WIFE'S WORK PHONE # _____

NAME, AGE, & RELATIONSHIP _____

OF ALL PERSONS LIVING WITH _____

YOU _____

HOW DID YOU FIND OUT ABOUT _____

MR. SIGMON _____

NOTE: PLEASE FILL OUT THESE FORMS COMPLETELY-CREDIT REPORTS ARE NOT SUFFICIENT AS THEY ARE NOT ALWAYS ACCURATE

LIST OF DEBTS

● **LIST OF DEBTS:** Please list the name of everyone you owe, no matter how small, of any nature whatsoever. Also, please show the amount of the monthly payment and the total amount owed for each. This list will include your mortgage, if any, your car loans, if any, credit cards, medical debts, taxes, money owed to friends and relatives and anything else for which there is a running balance that is not paid in full at the end of the month.

CREDITORS NAME	H,W,J **	FOR OFFICE USE ONLY	MONTHLY PAYMENT	TOTAL OWED

**Husband, Wife or Joint Debt

LIST OF MONTHLY LIVING EXPENSES

● **CURRENTLY MONTHLY EXPENSES:** Please list your current monthly living expenses below:

Rent or home mortgage payment (including lot rent for mobile home) \$ _____

Second/Third Mortgage payment \$ _____

Are real estate taxes included? Yes ___ No ___

Is property insurance included? Yes ___ No ___

Utilities Electricity/heating fuel/natural gas \$ _____

Water and Sewer \$ _____

Telephone \$ _____

Other: _____ \$ _____

Home Maintenance (Repairs and Upkeep) \$ _____

Food \$ _____

Clothing \$ _____

Laundry and Dry Cleaning \$ _____

Medical and Dental Expenses \$ _____

Transportation (not including car payments)-gas, etc. \$ _____

Recreation, clubs, and entertainment, newspapers, magazines, etc. \$ _____

Charitable Contributions \$ _____

Insurance (not deducted from wages or included in mortgage payments)

Homeowner's or renter's \$ _____

Life \$ _____

Health \$ _____

Auto \$ _____

Other _____ \$ _____

Taxes (not deducted from wages or included in mortgage payments) \$ _____

Specify: _____

Alimony, maintenance, and/ or child support paid to others \$ _____

Payments for support of additional dependents not living at your home \$ _____

Regular expenses from operation of business, profession or farm \$ _____

(Attach detailed statement)

Other: _____ \$ _____

TOTAL MONTHLY EXPENSES: \$ _____

BANKRUPTCY CONSULTATION CHECKLIST

	Mr.		Mrs.	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
1. Are you legally married?	_____	_____	_____	_____
2. Have you lived in North Carolina for the past three (3) years?	_____	_____	_____	_____
3. Have you ever filed bankruptcy before? If so, where, when, and what Chapter?	_____	_____	_____	_____
<hr style="border: 0.5px solid black;"/>				
Did you receive a discharge?	_____	_____	_____	_____
4. Have you purchased any type of motor vehicle within the past three years?	_____	_____	_____	_____
5. Are you listed as an account holder on anybody else's checking, savings, investment, mutual fund, and/or retirement accounts or any other financial account of any type?	_____	_____	_____	_____
6. Do you have any credit cards, lines of credit, or other loans of any type issued by the same bank where you maintain your banking accounts?	_____	_____	_____	_____
7. Have you filed all required tax returns with the Internal Revenue Service?	_____	_____	_____	_____
8. Have you filed all required tax returns with the state revenue department?	_____	_____	_____	_____
9. Do you owe any money to the Internal Revenue Service for any type of taxes?	_____	_____	_____	_____
10. Do you owe any monies to any state department of revenue for any type of taxes?	_____	_____	_____	_____
11. Are you expecting to receive any tax refunds from any prior tax years?	_____	_____	_____	_____
12. Are you contributing to any retirement plans?	_____	_____	_____	_____
13. Are you paying back any loans to your retirement plan?	_____	_____	_____	_____
14. Do you own any real estate other than your residence such as a time share or cemetery lot?	_____	_____	_____	_____

	Mr.		Mrs.	
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>
15. Have you used any credit cards to pay any tax debts?	_____	_____	_____	_____
16. Have you ever been convicted of a felony?	_____	_____	_____	_____
17. Do you have any ownership interest in any automobiles, trucks, recreational vehicles, boats, motorcycles, etc.?	_____	_____	_____	_____
18. Do you have any valuable assets such as expensive tools, jewelry, art collection, video or electronic equipment such as a widescreen TV, stocks, bonds, collectibles or antiques?	_____	_____	_____	_____
19. Are you involved in any lawsuits where you are the plaintiff and expect to receive any type of recovery financial or otherwise?	_____	_____	_____	_____
20. Are you in the position to sue anyone for any reason (such as a recent car accident)?	_____	_____	_____	_____
21. Do you now or have you ever owned a business?	_____	_____	_____	_____
22. Are you currently waiting to receive or are you anticipating the death of an individual which would result in your receiving any type of inheritance, life insurance proceeds, or any other type of death benefit?	_____	_____	_____	_____
23. Are you expecting to divorce a spouse that may result in a property settlement distribution to you (not alimony or child support)?	_____	_____	_____	_____
24. Have you used any real estate or personal property as collateral for a loan within the past two years?	_____	_____	_____	_____
25. Have you transferred or sold any real estate or personal property worth \$1000.00 or more within the last two years by any means including gift, sale, trade or other means?	_____	_____	_____	_____
26. Have you made any payment to or for the benefit of any family member or friend of \$600.00 or more within the last 12 months because of a debt owned by you to them?	_____	_____	_____	_____
27. Have you paid back or paid off any debts within the last year by making a lump sum payment?	_____	_____	_____	_____

	Mr.		Mrs.
<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>

28. Do you have any debts that you have not listed on the attached list of debts? _____

29. Do you have any state court judgments entered against you? _____

30. Have you charged a total of \$500.00 or more on any one credit card in the last three months? _____

31. Have you obtained cash in the form of any type of loan or from any of your credit cards within the last 70 days (such as ATM withdrawals, balance transfers, convenience checks, cash advances, or any other method to obtain cash)? _____

32. Have you transferred, sold, or given away any collateral listed in your secured loans? _____

33. Do you have any outstanding student loans? _____

34. Do you owe any back child support, alimony or monies related to a property settlement? _____

35. Have you bounced a check? _____

36. Are any of the mortgage(s) on your residence a home equity line of credit in which the monthly payment amount may change? _____

37. What is the appraised or tax value of your residence and of any other parcels of real property that you own? _____

38. Do you receive any social security benefits, disability benefits, retirement benefits, or unemployment compensation? Is so, state the amount received. _____

39. What is your, your husband or wife's, (and anyone else who contributes to your household expenses) gross pay (before any taxes or other deductions) from all sources for each month for the past six months? _____

40. What is your interest rate on each mortgage(s) on your residence and what is the late fee amount (if you do not make your payments on time)? _____
