

MARK B. FRENCH

Attorney at Law

Board Certified - Consumer Bankruptcy

Texas Board of Legal Specialization

New

1901 Central Drive
Suite 704
Bedford, Texas 76021
www.markfrenchlaw.com

(817) 268-0505
fax (817) 268-0597
mark@markfrenchlaw.com

BANKRUPTCY CLIENT INFORMATION SHEET

WHERE DID YOU HEAR ABOUT MY PRACTICE?

_____ Internet
_____ Referral by _____
_____ Other _____

Tell us what brings you here:

_____ My house payments are past due
_____ My car payments are past due
_____ I cannot make my credit card payments
_____ I lost income and cannot pay my bills
_____ Lawsuit(s)
_____ Foreclosure
_____ Medical debt that I cannot pay
_____ I owe the IRS
_____ My creditors are harassing me
_____ Other _____

Date _____

Name _____ Social Security # _____

Address _____

City/State/Zip _____ County _____

How long have you lived at this address? _____ How long have you lived in Texas? _____

Phone Numbers (Home) _____ (Work) _____ (Cell) _____

E-mail address _____

Best Way to Contact You _____

Date of Birth _____

Business/Employer _____ How Long? _____

Business Address _____

Type of Business _____

Marital Status (please check one)
 Never Married
 Married, living together, date of marriage _____
 Married, living apart
 Living with a domestic partner
 Divorced, date of divorce _____
 Widowed / Widower

Spouse's Name _____

Spouse's Social Security # _____

Spouse's Employer _____ How Long? _____

Spouse's Phone Numbers (Work) _____ (Cell) _____

PLEASE ANSWER EVERY QUESTION COMPLETELY,
TRUTHFULLY AND ACCURATELY

PUT N/A IF THE QUESTION DOES NOT APPLY TO YOU

INCOME: Your monthly gross (before tax) income \$ _____ Source _____
Spouse's monthly gross (before tax) income \$ _____ Source _____
Any other income \$ _____ Source _____

ALL assets and debts MUST be shown in the schedules.

Do not ask us to "Not include" an asset or debt in your bankruptcy.

Do you own any vehicles that are paid for? (circle one) Yes - No If yes, please describe them _____

SECURED DEBTS:

1st Home Mortgage - Creditor Name: _____

What is the pay off on this lien? \$ _____ Interest Rate: _____% Monthly Payment \$ _____

Does your payment include taxes? Yes - No Does your payment include insurance? Yes - No

What is the value of your home if sold today? \$ _____ How did you arrive at this figure? _____

Are you behind on your home? Yes - No If yes, how many months? _____

Do you want to keep your home? Yes - No

Is your home posted for foreclosure? Yes - No If yes, what is the sale date? _____

2nd Lien on your Home - Creditor Name: _____

What is the pay off on this lien? \$ _____ Interest Rate: _____% Monthly Payment \$ _____

Are you behind on your 2nd lien? Yes - No If yes, how many months? _____

First Car/Truck (year, make, model) _____ Mileage: _____

Creditor Name	Pay Off Amount	Interest Rate	Payment	Date Purchased
_____	\$ _____	_____ %	\$ _____	_____

Are you behind? Yes - No If yes, how many months? _____ Do you want to keep it? Yes - No

Second Car/Truck (year, make, model) _____ Mileage: _____

Creditor Name	Pay Off Amount	Interest Rate	Payment	Date Purchased
_____	\$ _____	_____ %	\$ _____	_____

Are you behind? Yes - No If yes, how many months? _____ Do you want to keep it? Yes - No

Other Creditors with Collateral: non-homestead real estate (lake home, land...), additional vehicles (motorcycle, boat, jet ski, 4-wheeler...), major appliances (washer, dryer, refrigerator...), pool, furniture, big screen ...

Creditor Name	Pay Off Amount	Interest Rate	Payment	Date Purchased
_____	\$ _____	_____ %	\$ _____	_____

Are you behind? Yes - No If yes, how many months? _____ Do you want to keep it? Yes - No

TAXES OWED:

Have you filed all federal and state income tax returns that are presently due? Yes - No If you answered no, please explain why you have not filed your returns when due _____

<u>Creditor</u>	<u>Type of Tax (1040, 940, 941)</u>	<u>Year/Quarter</u>	<u>Amount Due</u>	<u>Lien filed</u>
IRS _____	_____	_____	\$ _____	Yes - No
IRS _____	_____	_____	\$ _____	Yes - No
Other Tax _____	_____	_____	\$ _____	Yes - No

OTHER DEBTS:

Type of Debt	Total Debt	Comments
Credit Cards	\$ _____	
Lines of Credit		
Student Loans	\$ _____	
Medical Bills	\$ _____	
Alimony/Child Support	\$ _____	
401k Loans	\$ _____	
Payday Loans	\$ _____	
Business Debt	\$ _____	
Loans from friends or relatives	\$ _____	
Unpaid Bills (utilities, rent, etc.)	\$ _____	
Judgments	\$ _____	
Other (specify)	\$ _____	

Have you charged, taken a cash advance, or written a convenience check totaling more than \$1,000 to a single creditor in the past 6 months? Yes - No If yes,

How much?	When?	What is the current pay off to that creditor?
\$ _____	_____	\$ _____

Do you have any retirement accounts? Yes - No

If yes, what kind _____ Approximate balance \$ _____

If you own ANY property, other than your home, contents of your home, your automobiles, tools of your trade, or your retirement accounts please describe it here _____

Do you own or have an interest in a business? Yes - No

If yes, list business name and location _____

Have you ever filed for bankruptcy before? Yes - No If yes, how many times ____ and when? _____

Who lives with you? Include your spouse & anyone you claim as a dependant on your tax return.

Name	Relationship to You	Age	Dependent on Tax Return
			Yes - No
			Yes - No
			Yes - No
			Yes - No

Please briefly describe the circumstances (for example: decrease in income, illness, divorce, unsuccessful business) that have caused your financial difficulties.

CIRCLE Y OR N FOR YOU AND YOUR SPOUSE

1. Y - N Are you behind on child support or alimony?
If yes, how much do you owe? _____
2. Y - N Have you transferred property to anyone in the past two years?
(Transfer means to sell, give or trade any real or personal property to another person.)
If yes, What property? _____ To whom? _____
3. Y - N Is there anyone who has sued or could sue you?
If yes, Who? _____ Why? _____
4. Y - N Is there anyone you could sue for money damages?
If yes, Who? _____ Why? _____
5. Y - N Do you have any personal injury claims?
If yes, against whom? _____ Why? _____
6. Y - N Does anyone owe you money?
If yes, Who? _____ How much? _____ Why? _____
7. Y - N Are you currently the beneficiary of a trust or an heir of an estate in probate?
If yes, please explain _____
8. Y - N Are either of your parents deceased?
If so, is there any property in the estate that has not been distributed? _____
Did the deceased have a will? _____
9. Y - N Is anyone in the possession of anything you own or anything you have a claim to?
If yes, what property? _____ Why are they holding it? _____
10. Y - N Do you owe any money or property to any family or friends?
If yes, to whom? _____ How much? _____

11. Y - N Have you made any payments to any family or friends within the last year?
If yes, to whom? _____ How much? _____ When? _____
12. Y - N In the last seven months have you received money, financial assistance, investment income, (including withdrawals from IRA's or 401K's), pension, retirement income or from any source other than your employment?
If yes, how much? _____ From whom? _____
13. Y - N Would any personal (not business) bank accounts that you have used within the past year show any deposits other than your own payroll, or your spouse's payroll?
14. Y - N Would any personal (not business) bank accounts that you have used within the past year show any canceled checks or debits for anything other than payment of normal, reasonable bills and living expenses and/or small ATM withdrawals?
15. Y - N Do you owe any money (credit cards, signature loans, lines of credit etc.) to the bank in which you have your checking or savings account?
If yes, how much? _____ and which institution? _____
16. Y - N Are you listed on any checking or savings account that is not yours?
If yes, please explain _____
17. Y - N Are there any tax returns that you have not filed?
If yes, how much and which year? _____
18. Y - N Have you made any payments on your home other than regular monthly payments?
If yes, where did the funds come from? _____
How much did you pay? _____
19. Y - N Do you have monthly payments for life insurance for you and/or your spouse?
If yes, how much are the monthly payments? _____
20. Y - N Do you have monthly expenses for health care that are not reimbursed by insurance or paid for by a health savings account?
If yes, for what? _____ How much is paid? _____
21. Y - N Do you pay for health insurance, disability insurance, or a health savings account?
If yes, how much for each? _____
22. Y - N Do you contribute to or pay for care and or support of an elderly, chronically ill, or disabled member of your household or a member of your immediate family who is unable to pay for such expenses?
If yes, please explain _____ How much is paid? _____
23. Y - N Do you have monthly expenses for child care?
If yes, how much is paid? _____
24. Y - N Do you have monthly expenses for internet service?
If yes, how much is paid? _____
25. Y - N Do you make monthly religious or charitable contributions?
If yes, to whom? _____ How much is paid? _____

- 26. Y - N Do you make regular contributions to a retirement plan?
If yes, how much is paid? _____
- 27. Y - N Have you pawned any of your property in the last 90 days?
If yes, please explain _____
- 28. Y - N Was any of your debt incurred to pay taxes? If yes, what kind of taxes? _____
- 29. Y - N Does any divorce decree order you to pay debts you want discharged? _____
- 30. Y - N Have you received over \$5,000 from any source, other than normal income, in the last 12 months?
If yes, state the source and amount(s) _____
- 31. Y - N Have you made any large purchases (\$500 dollars or more) in the last 90 days? _____
- 32. Y - N Have you taken out any loans or cash advances in the last 90 days? _____
- 33. Y - N Have you paid back friends or relatives more than \$300 in the last 12 months? _____
- 34. Y - N Has anyone served you with Court papers or filed a lawsuit against you in the last 3 years? _____
- 35. Y - N Have you owned a business at any time within the last 6 years? _____
- 36. Y - N Do you own any property in another County or State? _____

Anything else you think Mr. French should be aware of? _____

Your Signature _____

Your Spouse's Signature _____

<i>FOR OFFICE USE ONLY</i>
NOTES:

Bring the Following Information to Your Initial Consultation

You need to bring **copies** of the following documents to my office for your initial appointment. It is very important that you bring **copies** of these items with you so that my analysis of your situation can be as complete as possible. **We do not accept originals.**

1. Your driver's license.
2. Copies of income tax returns for the last 2 years.
3. Copies of the last 2 pay stubs from all employment.
4. A copy of property tax statements on all real estate you own or are buying.
5. Copies of last 2 months billing statements for all vehicles you are buying.
6. Copies of last 2 months billing statements for mortgage(s).
7. Copies of contracts for all autos you are buying.
8. Copies of contracts for any real property you are buying.
9. Copies of all legal documents pertaining to lawsuits which are pending or which have been finalized in the past 12 months.
10. Copies of all judgments against you.
11. A copy of any divorce decree under which you are obligated to make Child Custody or Support Payments or even if you do not have those obligations, if the decree was entered in the last 5 years we need a copy of it.