

Vanden Bos & Chapman, LLP
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503-241-4869

**INTAKE FORM #1 -
FOR CONSUMER CHAPTER 7 OR 13
INTAKE FORM**

Please read and answer each question completely. If a question does not apply to you, please fill in the initials "n/a" (not applicable) to let us know the question does not apply.

PRELIMINARY INFORMATION

1. Debtor 1

Name (including middle name):	
Other names in the last 8 years:	
Social Security #	Tax ID #
Driver's License #	Date of Birth:
Street Address:	
City, State, Zip:	
Mailing Address (if different from above):	
City, State, Zip:	
Home Phone:	Work Phone:
Cell Phone:	Fax Number:
Email:	
Hours at Work (i.e., 8 am – 5 pm):	Days at work (i.e., Mon-Fri):
OK to phone at work? Yes ____ No. ____	
County of Residence (i.e., Multnomah, Washington):	
How many years have you lived in Oregon?	
Name of relative or friend who can usually reach you:	
Marital Status: Single ____; Married ____ Divorced ____; Widowed ____	
Phone Number of relative or friend who can usually reach you:	

2. Debtor 2 (If this is a joint filing – Debtor 2's Information):

Name (including middle name):	
Other names in the last 8 years:	
Social Security #	Tax ID #
Driver's License #	Date of Birth:
Street Address:	
City, State, Zip:	
Mailing Address (if different from above):	
City, State, Zip:	
Home Phone:	Work Phone:
Cell Phone:	Fax Number:
Email:	
Hours at Work (i.e., 8 am – 5 pm):	Days at work (i.e., Mon-Fri):
OK to phone at work? Yes: ____ No. ____	
County of Residence (i.e., Multnomah, Washington):	
How many years have you lived in Oregon?	
Name of relative or friend who can usually reach you:	
Phone Number of relative or friend who can usually reach you:	

3. Prior Bankruptcy

Have you or Debtor 2 (if applicable) ever filed bankruptcy before: Yes: ____ No. ____
If yes, when: _____ Which Chapter? Ch. 7 ____ Ch. 13 ____ Other ____

4. Rental of Residence

Do you rent your home: Yes: ____ No. ____
If yes , has your landlord obtained an eviction judgment against you? Yes ____ No. ____ Do you want to stay in your residence? Yes ____ No. ____

5. Hazardous Materials

Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Yes: ____ No. ____
Do you own any property that needs immediate attention? Yes ____ No ____
If yes , what is the hazard: If yes , if immediate attention is needed, why is it needed?

ASSET INFORMATION

PART 1: Real Estate

Do you own any real estate? Yes: ____ No. ____ . If no, go to PART 2.

REAL PROPERTY NO. 1

Street Address: _____

County: _____

Name(s) on title to Real Estate: _____

VALUE:

Current Value: \$ _____ Tax RMV Value (County): \$ _____

Current Value of the Portion You Own: _____

Describe Nature of Your Ownership Interest (i.e., fee simple, tenancy by the entireties, or a life estate), if known: _____

Is this community property: Yes: ____ No. ____ ?

Any attempts to sell? Yes: ____ No. ____ . If yes, lowest price listed for sale? \$ ____ . When?

When did you purchase the property? Date: _____

LIABILITIES ON REAL ESTATE

Property Taxes - Current Yes ____ No ____ -- If No, Amount Owed: _____;

Home Owner's Association ("HOA") – If applicable, provide name and address of HOA: _____

First Mortgage Holder Info:

Name and Full Address of First Mortgage Holder: _____

Date of Mortgage/Loan: _____ Account No. _____

Interest Rate: _____ Current Loan Balance: _____

Monthly Payment: \$ _____ -- Insurance Included in Payment? Yes ☐ No ☐.
Property taxes included in Payment? Yes ☐ No ☐.

Amount of Arrearages, if any: _____ If in arrears, how many months? _____

Is there a Guarantor on the First Mortgage other than Debtor 2? **Yes** ____ **No** _____. If yes, provide the full name and address of the guarantor: _____

Are you related to Guarantor and if yes, how are you related: **Yes** ____ **No** ____.
Relationship (Relative, friend, insider, etc.) _____

Keep Property - Yes No.

Second Mortgage Holder Info:

Name and Full Address of Second Mortgage Holder:

Date of Mortgage/Loan: _____ Account No. _____

Interest Rate: _____ Current Loan Balance: _____

Monthly Payment: \$ _____

Amount of Arrearages, if any: _____ If in arrears, how many months? _____

Is there a Guarantor on the Second Mortgage other than Debtor 2? **Yes** ____ **No** _____. If yes, provide the full name and address of the guarantor: _____

Are you related to Guarantor and if yes, how are you related: **Yes** ____ **No** ____.
Relationship (Relative, friend, insider, etc.) _____

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Third Mortgage Holder Info:

Name and Full Address of Third Mortgage Holder: _____

Date of Mortgage/Loan: _____ Account No. _____

Interest Rate: _____ Current Loan Balance: _____

Monthly Payment: \$ _____

Amount of Arrearages, if any: _____ If in arrears, how many months? _____

Is there a Guarantor on the Third Mortgage other than Debtor 2? **Yes** ____ **No** _____. If yes, provide the full name and address of the guarantor: _____

Are you related to Guarantor and if yes, how are you related: **Yes** ____ **No** _____.
Relationship (Relative, friend, insider, etc.) _____

Judgment Lien(s) Against Real Estate –

Name & Full Address of Judgment Creditor Holding Lien Against Your Real Estate	Date of Judgment	Amount of Judgment	Balance Owed on Judgment

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PART 2. Vehicles

(VBC 3)

Cars, vans, trucks, tractors, sport utility vehicles, motorcycles. (You can get Trade In and Private Party Values online at <http://www.kbb.com/>)

Please complete ALL information describing your Vehicle(s) including Motorcycles, RV's, Trailers etc.

Vehicle 1:

Make/Model/Year: _____ **Mileage:** _____

Current Value - Trade in: \$ _____; Private Party: \$ _____

All Name(s) on Title: _____

Vehicle 1 – Liability Information

Lender's Full Name and Address: _____

Date of Purchase: _____ **Interest Rate** _____ **Acct No.** _____

Balance Owed: _____ **Monthly Payment:** \$ _____; **Keep or Return:** _____

Are you current on payments? Yes ____ No ____ . If not, how many months in arrears? _____

Name and address of Co-signor/Guarantor on loan: _____

Vehicle 2:

Make/Model/Year: _____ **Mileage:** _____

Current Value - Trade in: \$ _____; Private Party: \$ _____

All Name(s) on Title: _____

Vehicle 2 – Liability Information

Lender's Full Name and address: _____

Date of Purchase: _____ Interest Rate _____ Acct No. _____

Balance Owed: _____ Monthly Payment: \$ _____; Keep or Return: _____

Are you current on payments? Yes ___ No _____. If not, how many months in arrears? _____

Name and address of Co-signor/Guarantor on loan: _____

Vehicle 3:

Make/Model/Year: _____ **Mileage:** _____

Current Value - Trade in: \$ _____; Private Party: \$ _____

All Name(s) on Title: _____

Vehicle 3 – Liability Information

Lender's Full Name and address: _____

Date of Purchase: _____ Interest Rate _____ Acct No. _____

Balance Owed: _____ Monthly Payment: \$ _____; Keep or Return: _____

Are you current on payments? Yes ___ No _____. If not, how many months in arrears? _____

Name and address of Co-signor/Guarantor on loan: _____

**IF OTHER VEHICLES, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE
AND INSERT THAT PAGE BEHIND THIS PAGE.**

(VBC 4a) **Watercraft, Aircraft, Motorhomes, ATVs and Other Recreational Vehicles and Accessories** (i.e., boats, trailers, motors, personal watercraft, fishing vessels, snow mobiles, motorcycle accessories).

Watercraft: (Go online to <http://www.nadaguides.com/Boats> to obtain the valuation of your boat(s) directly from the Nada Guide, print the valuation and bring it to your appointment with you.

Aircraft: [FAA Registry - Aircraft - Name Inquiry](#)

Go online to obtain the registry information of your aircraft directly from the FAA, print the information and bring it to your appointment with you.

NO. 1 - Plane/Boat/Motorhome/Etc.:

Make/Model/Year/Type: _____ **Mileage/Hours:** _____
Registration No. (Plane): _____; **Mfg Serial No.** _____
Current Value - Trade in: \$ _____; Private Party: \$ _____

All Name(s) on Title: _____

NO. 1 - Plane/Boat/Motorhome/Etc. – Liability Information

Lender's Full Name and address: _____

Date of Purchase: _____ **Interest Rate** _____ **Acct No.** _____

Balance Owed: _____ **Monthly Payment:** \$ _____; **Keep or Return:** _____

Are you current on payments? Yes ___ No _____. If not, how many months in arrears? _____

Name and address of Co-signor/Guarantor on loan: _____

Make/Model/Year/Type: _____ **Mileage/Hours:** _____
Registration No. (Plane): _____; **Mfg Serial No.** _____
Current Value - Trade in: \$ _____; **Private Party:** \$ _____

All Name(s) on Title: _____

Name and full address of Lender: _____

Date of Purchase: _____ **Interest Rate** _____ **Acct No.** _____

Balance Owed on Plane/Boat/Motorhome/Etc., _____ Monthly Payment: \$ _____;
Keep or Return:

Are you current on payments? Yes No . If not, how many months in arrears?

Name and address of Co-signor/Guarantor on loan: _____

PLEASE REVIEW THE FOLLOWING SECTIONS CAREFULLY. IF YOU HAVE ANY OF THE FOLLOWING CATEGORIES OF ASSETS (i.e.: CLOTHING, NON-FARM ANIMALS), PLEASE LIST A GARAGE SALE VALUE EVEN IF YOU BELIEVE THE ITEM HAS LITTLE TO NO VALUE.

Indicate what categories of property you own or don't own by marking "Yes" or "No." WHERE APPLICABLE, INDICATE QUANTITY, DESCRIPTIONS AND VALUE.

APPROXIMATE TOTAL VALUE: \$ _____

If any household item or furnishing has a loan against the item, please provide the full name and address of Lender:

Balance Owed on Loan:	Description of Item:

Keep or Return Item: _____ **If Co-Signor /Guarantor on Loan, please provide:**

Name: _____ Address: _____
_____, Relationship to you: _____

Full name and address of Lender on another loan regarding another household item or furnishing:

Balance Owed on Loan: _____ Description of Item: _____

Keep or Return Item: _____ If Co-Signor /Guarantor on Loan, please provide:
Name: _____ Address: _____
_____, Relationship to you: _____

IF OTHER LOANS ON HOUSEHOLD ITEMS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE.

(VBC 7) – Electronics (i.e., TV's and radios, audio, video, stereo and digital equipment; computers, printers, scanners, music collections, electronic devices, including cell phones, cameras, medial players, games):

APPROXIMATE TOTAL VALUE: \$ _____.

If any electronic item has a loan against it, please provide the full name and address of Lender:

Balance Owed on Loan: _____ Description of Item: _____

Keep or Return Item: _____ If Co-Signor /Guarantor on Loan, please provide:
Name: _____ Address: _____
_____, Relationship to you: _____

IF OTHER LOANS ON ELECTRONIC ITEMS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE.

(VBC 8) Collectibles of Value (i.e., antiques and figurines, paintings, prints or other artwork; books pictures, or other art objects; stamp, coin or baseball card collections, or other collections or memorabilia, art objects, antiques):

APPROXIMATE TOTAL VALUE: \$ _____.

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00 AND THE APPROXIMATE VALUE:

(VBC 9) – Equipment for Sports & Hobbies (i.e., sports, photographic, exercise and other hobby equipment; bicycles, pool tables, golf clubs, skis, canoes and kayaks, carpentry tools, musical instruments)

APPROXIMATE TOTAL VALUE: \$ _____.

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00 AND THE APPROXIMATE VALUE:

(VBC 10) – Firearms - (i.e., pistols, rifles, shotguns, ammunition and related equipment).				
TOTAL APPROXIMATE VALUE: \$ _____.				
Type (rifle, pistol, etc.)	Make	Model	Caliber	Value
Any Single Item Valued Over \$1,000.00 (Describe)				

(VBC 10) – Firearms - (i.e., pistols, rifles, shotguns, ammunition and related equipment).				
TOTAL APPROXIMATE VALUE: \$ _____.				
Type (rifle, pistol, etc.)	Make	Model	Caliber	Value
Any Single Item Valued Over \$1,000.00 (Describe)				

Type (rifle, pistol, etc.)	Make	Model	Caliber	Value
Any Single Item Valued Over \$1,000.00 (Describe)				

(VBC 11) – Clothes (Clothes (i.e., everyday clothes, furs, leather coats, designer wear, shoes, accessories)

APPROXIMATE TOTAL VALUE: \$ _____.

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE:

(VBC 11) – Clothes (Clothes (i.e., everyday clothes, furs, leather coats, designer wear, shoes, accessories)

APPROXIMATE TOTAL VALUE: \$ _____.

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE:

(VBC 11) – Clothes (Clothes (i.e., everyday clothes, furs, leather coats, designer wear, shoes, accessories)

APPROXIMATE TOTAL VALUE: \$ _____.

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE:

(VBC 12) – Jewelry (i.e., everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver)

APPROXIMATE TOTAL VALUE: \$ _____

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE

(VBC 12) – Jewelry (i.e., everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver)

APPROXIMATE TOTAL VALUE: \$ _____

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE

(VBC 12) – Jewelry (i.e., everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver)

APPROXIMATE TOTAL VALUE: \$ _____

DESCRIBE ANY SINGLE ITEM WITH A VALUE OVER \$1,000.00, AND THE APPROXIMATE VALUE

(VBC 13) – Non-Farm Animal/Pets (Non-farm animals/Pets (i.e., Dogs, cats, birds, horses))

TOTAL APPROXIMATE VALUE: _____ **Description of Pet(s):** _____

(VBC 13) – Non-Farm Animal/Pets (Non-farm animals/Pets (i.e., Dogs, cats, birds, horses))

TOTAL APPROXIMATE VALUE: _____ **Description of Pet(s):** _____

(VBC 14) – Any Other Personal and Household Items (Any other personal or household items you did not already list, including health aids):

TOTAL APPROXIMATE VALUE: \$ _____.

(VBC 14) – Any Other Personal and Household Items (Any other personal or household items you did not already list, including health aids):

TOTAL APPROXIMATE VALUE: \$ _____.

PART 4. Financial Assets	
(VBC 16) – Cash on hand.	AMOUNT OF CASH: _____

(VBC 16) – Cash on hand.

AMOUNT OF CASH: _____

(VBC 16) – Cash on hand.

AMOUNT OF CASH: _____

(VBC 17-1) – Deposits of Money (i.e., checking, savings or other financial accounts, certificates of deposit, shares in credit unions, brokerage houses, and other similar institutions):

PROVIDE THE FOLLOWING FOR EACH ACCOUNT:

Bank Name	Last 4 Digits of Acct#	Type of Account	Joint; Debtor or Spouse's Name on Account	Approx. Balance	Any Other Debts W/this Bank?

IF OTHER BANK ACCOUNTS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE

(VBC 17-2) – Other cash equivalents (*Identify all*) (Gift Cards, Venmo, Cash App, Apple Cash, PayPal, Reliacard, gift certificates, crypto cash, etc.)

Provide the following for each account:

Description	Last 4 Digits of Acct#	Type of Account	Joint; Debtor or Spouse Name on Account	Balance

(VBC 18) – Brokerage Accounts, Bonds, Mutual Funds, or Publicly Traded Stocks (i.e., bond funds, investment accounts with brokerage firms, money market accounts):

Provide the following for each account:

Institution or Issuer Name	Last 4 Digits of Acct#	Type of Account	Joint; Debtor or Spouse Name on Account	Balance	Any Other Debts W/this Financial Institution?	Type of Debt? (Loan, Credit Card)

(VBC 19) - (a) Non-Publicly Traded Stock and Interests in Incorporated and Unincorporated Businesses including an interest in an LLC, partnership, corporation, or joint venture:

You can use www.cbsmarketwatch.com for stock values. Provide the following for each account

Name	Ownership Interest (% or shares)	Current Value (per share)

(b) Interests in any incorporated businesses: Value of Company: \$ _____

Name of Business	Value of Company and Percentage of Interest

(c) Do you have any Interests in partnerships:

Name of Partnership	Value of Partnership and Percentage of Interest	Who is other partner?

VBC 20) - Government and Corporate Bonds and Other Negotiable and Non-Negotiable Instruments (i.e., Negotiable instruments include personal checks, cashier's checks, promissory notes, and money orders; and Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them)

Name (Include LLC / Inc. / LLP)	Interest (% or No. of Shares)	Value

(VBC 21) - Retirement or Pension Accounts (i.e., interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts or other pension or profit-sharing plans)

Type of Account (See Above)	Name of Financial Institution/ Company	Value (Do Not Deduct Any Loans Against)	Any Loans Against Account?	Amount Contributed Last Year	Balance of Loan

(VBC 22) - Security Deposits and Prepayments (i.e., your share of all unused deposits you have made so that you may continue service or use from a company – agreements with landlords, prepaid rent, public utilities, telecommunications companies, etc.)

\$ _____

(VBC 23) – Annuities

Name of Company and value of annuity:

(VBC 24) – Interests in Education IRA, in an account is a Qualified ABLE Program or under a Qualified State Tuition Program

Type of Account (See Above)	Account Custodian	Value (Do Not Deduct Any Loans Against)	Any Loans Against Account?	Amount Contributed Last Year	Balance of Loan

(VBC 25) – Trusts, Equitable or Future Interest in Property (Interest in a trust(s), equitable or future interests in property (other than anything listed in No. 1) and rights or powers exercisable for your benefit)

Describe	Amount

(VBC 26) - Patents, Copyrights, Trademarks, Trade Secrets and Other Intellectual Property (i.e., Internet domain names, websites, proceeds from royalties and licensing agreements)

Describe	Amount

(VBC 27) - Licenses, Franchises and Other General Intangibles (i.e., building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses):

Describe	Amount

(VBC 28) - Tax Refunds Owed to You:		
Describe:	Amount:	Who is owed: Debtor, Spouse, Joint

(VBC 29 & 30) – Family Support and Other Amounts Someone Owes to You				
Yes: <input type="checkbox"/> No. <input type="checkbox"/> Family support (i.e., Amounts owed to you for past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement)? Yes: <input type="checkbox"/> No. <input type="checkbox"/> Other amounts someone owes to you (i.e., unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loans you made to someone else):				
Describe (include names and addresses)	Monthly Support Payment	Amount in arrears	Total Amount Owed	Who is Owed (Debtor, Spouse, Jointly)

(VBC 31) - Interests in Insurance Policies (Interests in insurance policies (i.e., health, disability, or life insurance; health savings account (HSA); credit, homeowner's or renter's insurance)				
Type	Insurer	Last 4 Digits of Policy#	Who is Beneficiary?	Value (if any)

(VBC 32) - Any interest in property that is due you from someone who has died (i.e., if you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died)	
Describe	Amount

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(VBC 33 and VBC 34) -

Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment (i.e., accidents, employment disputes, insurance claims or other rights to sue):

Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims:

Description:	Value:

(VBC 35) – List Any Financial Assets Not Already Listed Above.

PART 7. Describe All Property You Own or Have an Interest in That You Did Not List Above

(VBC 53)

Do you have other property of any kind you did not already list? (i.e., _____):

Description:	Value:

LIABILITIES / CREDITORS AND DEBTS

PROVIDE THE FOLLOWING INFORMATION ABOUT ALL OF YOUR DEBTS AND CREDITORS, INCLUDING DEBTS OWED TO SURETY COMPANY(IES) FOR BOND INDEMNIFICATION, FAMILY MEMBERS, INSIDERS, etc., (“Insiders” include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101.) It is important that we include all of your creditors on your schedules because amending your schedules to add a creditor(s) requires an additional fee.

PLEASE NOTE: YOU MUST PROVIDE US WITH A COMPLETE CORRESPONDENCE ADDRESS (NOT PAYMENT ADDRESSES) FOR EVERY CREDITOR, INCLUDING ZIP CODE. INCOMPLETE ADDRESSES OR PAYMENT ADDRESSES WILL PREVENT US FROM COMPLETING YOUR PAPERWORK OR MAY RESULT IN REJECTION OF YOUR SCHEDULES BY THE BANKRUPTCY COURT AND DELAY IN THE FILING OF YOUR CASE.

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CREDITORS WHO HAVE PRIORITY AND UNSECURED CLAIMS

PART 1 is for Creditors with Priority Claims (i.e., Domestic support obligations, Taxes and certain other debts owed to the government; Claims (if any) for death or personal injury due to intoxication).

PRIORITY CREDITORS

Do you owe Child Support or Alimony? If yes, fill in name, address, amount owed to party receiving payment and provide details, i.e., date payments began, date of when payments are to end.

Name Owed To:	Address	Amount Owed	Other Details (i.e., Beginning and Ending Dates of Payments)

Taxing Authorities Information

When you file your taxes, do you expect: ____ a Refund; ____ To pay; ____ Break even; ____

If you expect a refund - How much for federal? \$ _____. How much for state? \$ _____.

Have you received either or both refunds? Yes: ____ No: ____

If you expect to pay, how much to each? Federal: \$ _____ State: \$ _____.

Did you receive an income tax refund for the year before? Yes: ____ No: ____

How much for federal? \$ _____ How much for state? \$ _____

Are you entitled to a refund from any prior tax years? Yes: ____ No: ____ Amount: \$ _____

If Yes, What Year: Federal: ____ State: ____ Name of State: _____

Have you filed all your previous Personal Federal/State Tax Returns? Yes: ____ No: ____

If No, which years have NOT been filed?

List all Unpaid Federal Taxes.

Year	Amount Owed	Lien Filed?

List all Unpaid State Taxes.

State	Year	Amount Owed	Lien Filed?

Have you filed all other tax returns for any other taxing authority (i.e., City, County)?**List all Unpaid Taxes from other taxing authority.**

City/County	Year	Amount Owed	Lien/Judgment Filed?

PLEASE NOTE:

LIST ALL YOUR UNSECURED DEBTS (INCLUDING DEBTS TO FAMILY MEMBERS) AND PROVIDE A COMPLETE CORRESPONDENCE ADDRESS (NOT PAYMENT ADDRESS) FOR EVERY CREDITOR, INCLUDING ZIP CODE. INCOMPLETE ADDRESSES OR PAYMENT ADDRESSES WILL PREVENT US FROM COMPLETING YOUR PAPERWORK OR MAY RESULT IN REJECTION OF YOUR SCHEDULES BY THE BANKRUPTCY COURT AND DELAY THE FILING OF YOUR CASE.

A. CREDIT CARDS AND/OR PERSONAL LOANS WITHOUT COLLATERAL WITH BANKS, CREDIT UNIONS, HOME DEPOT, etc.

Name & Address of Creditor	Whose Debt (Joint, Debtor 1, Debtor 2)	Other Parties Liable for this Debt	Account No.	Amount Owed

IF ADDITIONAL CREDITORS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE.

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B. NON-FINANCIAL INSTITUTIONS (i.e., medical bills, personal loans from friends and/or relatives, etc.)

Name & Address of Creditor	Whose Debt (Joint, Debtor 1, Debtor 2)	Other Parties Liable for this Debt	Account No.	Amount Owed

IF ADDITIONAL CREDITORS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE

EXECUTORY CONTRACTS AND UNEXPIRED LEASES

1. Do you have any leases or executory contracts? (Such as vehicle lease, office lease, furniture rental?)

Yes: ____ No. ____ If Yes, please provide:

2. List separately each person or company with whom you have a contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).

List full of each contract and unexpired lease and list time remaining on lease/contract, monthly payment, & account number	Name and Address of Person/Company You Have Contract/Lease	Relationship	Names of Parties on Lease or Contract

IF ADDITIONAL CONTRACTS/LEASES, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE

PLEASE BRING COPIES OF NONRESIDENTIAL AND RESIDENTIAL LEASES AND EXECUTORY CONTRACTS WITH YOU TO YOUR APPOINTMENT.

CODEBTORS

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. Answer every question.

1. Do you have any codebtors? (i.e., son or daughter on a student loan) (If you are filing a joint case, do not list either spouse as a codebtor?) Yes: ____ No. ____

2. List all of your codebtors. DO NOT INCLUDE YOUR SPOUSE AS A CODEBTOR IF YOUR SPOUSE IS FILING WITH YOU.

Name & Address of Codebtor	Relation	Name of Creditor to Whom You and Codebtor Owe the Debt

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BUDGET INFORMATION

PART 1:

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. Answer every question.

1. Employment status: Debtor No. 1: <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed Debtor No. 2: <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed
If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.

Debtor No. 1		Debtor No. 2	
Occupation (i.e., truck driver, chef):		Occupation (i.e., truck driver, chef):	
Name & Address of Employer		Name of Employer	
How long employed?		How long employed?	

PART 2:

FOR EACH HOUSEHOLD MEMBER, PLEASE ATTACH FOUR RECENT PAY STUBS FROM AN AVERAGE PAY PERIOD.

List All Other Income Received:	Debtor 1	Debtor 2
Net income from rental property and from operating a business, profession or farm. (Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.)		
Interest and dividends:		
Family Support Payments that you, a non-filing spouse, or a dependent regularly receive. (Include alimony, spousal support, child support, maintenance, divorce settlement and property settlement.)		
Unemployment Compensation		

List All Other Income Received:	Debtor 1	Debtor 2
Social Security		
Other government assistance that you regularly receive. (Include cash assistance and the value (if known) of any non-cash assistance that you receive, i.e., food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)		
Pension and retirement income		
Other income (i.e., Trust income) (Describe on next line(s))		
Describe:		
Describe:		
9. Subtotal Other Income: (VBC will enter total)		
10. TOTAL INCOME (LESS DEDUCTIONS) (VBC will enter total)		
11. State all other regular contributions to the expenses that you list under "Your Expenses" PARTS 1 and 2. (Include contributions from an unmarried partner, members of your household, your dependents, your roommates and other friends or relatives.) (Do not include any amounts already included in lines 2-10.)		
12. TOTAL INCOME (Add Lines 10 and 11) (VBC will enter total)		

YOUR EXPENSES

PART 1: Describe Your Household:

1. Is this a joint case? No: <input type="text"/> Go to Line 2. Yes: <input type="text"/> Does Debtor 2 live in a separate household? Yes: <input type="text"/> ; No: <input type="text"/> .
2. Do you have any dependents other than your spouse and self? Yes: <input type="text"/> No. <input type="text"/> If Yes - Complete Below <u>If not married</u>, do you share expenses with anyone in your household? Yes: <input type="text"/> No. <input type="text"/>

Dependent's Relationship to Debtor 1 or Debtor 2	Dependent's Age	Does Dependent Live with You?

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3. Do you anticipate any substantial income changes, upward or downward, in the next six months?
 Yes: ____ No. ____ If yes, please explain.

Estimate Your Current Monthly Expenditures:

MONTHLY EXPENSES	Monthly Amount
4. Rent or 1st mortgage (include assessments – <u>Do not include 2 or 3 mortgage(s)</u>) Are property taxes included? Yes: ____ No. ____ Is Insurance Included? Yes: ____ No. ____	
If not include in No. 4:	
4a. Real estate taxes	
4b. Property, homeowner's or renter's insurance	
4c. Home maintenance, repair, and upkeep expenses	
4d. Homeowner's association or condominium dues	
5. Additional mortgage payments for your residence, such as home equity loans	
6. Utilities:	
6a. Electricity, heat (wood or oil), natural gas	
6b. Water, Sewer, Garbage collection	
6c. Telephone, Internet, Cable, Alarm (Please breakdown: Home Phone \$ ____; Cellular \$ ____; Internet/DSL \$ ____; Cable \$ ____; Alarm \$ ____; Add'l Fax/phone Line: \$ ____): Total:	
6d. Other. Specify: (i.e., Satellite)	
7. Food and housekeeping supplies	
8. Childcare and children's education costs	
9. Clothing, laundry, and dry cleaning	
10. Personal care products and services	
11. Medical and dental expenses	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	
14. Charitable contributions and religious donations	

MONTHLY EXPENSES	Monthly Amount
15. Insurance.	
15a. Life insurance	
15b. Health insurance (Do not include if deducted from your paycheck.)	
15c. Vehicle insurance	
15d. Other insurance. Specify (i.e., disability, AFLAC): _____.	
Other insurance (i.e. disability, AFLAC) Describe:	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	
17. Installment or lease payments:	
17a. Car installment payment - Vehicle 1	
17b. Car installment payment - Vehicle 2	
17c. Other installments on items you want to keep (2nd or 3rd Mortgage, furniture):	
17d. Other. Specify: _____.	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on Page 26, line 5, Budget Information, PART 2.	
19. Other payments you make to support others who do not live with you. Specify: _____.	
20. Other real property expenses not included in lines 4 or 5 of your "Monthly Expenses" or under "Your Income," pages 26 and 27.	
20a. Mortgages on other property	
20b. Real estate taxes	
20c. Property, homeowner's, or renter's insurance	
20d. Maintenance, repair, and upkeep expenses	
20e. Homeowner's association or condominium dues	
21. Other: Specify: (i.e., Pet/Veterinary Expenses) .	

MONTHLY EXPENSES	Monthly Amount
22. Calculate your monthly expenses (VBC WILL CALCULATE 22a – 22c)	
22a. Add lines 4 through 21.	
22b. Copy line 22 (monthly expenses for Debtor 2), if any.	
22c. Add line 22a and 22b. The result is your monthly expenses.	
23. Calculate your monthly net income. (VBC WILL CALCULATE 23a – 23c)	
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	
23b. Copy your monthly expenses from line 22c above.	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? Yes: <input type="checkbox"/> No: <input type="checkbox"/> Explain: _____.	

STATEMENT OF FINANCIAL AFFAIRS

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form.

PART 1:

2. During the last 3 years, have you lived anywhere other than where you live now: Yes: <input type="checkbox"/> No: <input type="checkbox"/> If Yes - List all prior addresses during the last three years:				
Address	City, State & Zip	Who Lived There	Month & Year Moved In	Month & Year Moved Out
Example: 1234 SW 5 th	Portland, OR 97221	Both Debtors	6/2007	6/2011

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (<i>Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.</i>) Yes: <input type="checkbox"/> No: <input type="checkbox"/>
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PART 2:

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

DEBTOR 1	DEBTOR 2
Year to Date: \$	Year to Date: \$
Last Year: \$	Last Year: \$
Prior Year: \$	Prior Year: \$

PLEASE BRING COPIES OF YOUR LAST TWO YEARS OF TAX RETURNS WITH YOU TO YOUR APPOINTMENT. THANK YOU.

PART 3:

List Certain Payments You Made Before You Filed for Bankruptcy.

6. DEBTS -				
DURING THE LAST <u>3-MONTH PERIOD</u> , DID YOU PAY ANY CREDITOR PAYMENT(S) TOTALING <u>\$600</u> OR MORE?				
Creditor Name and Address	Dates of Payment	Total Amount Paid	Amount You Still Owe	Identify What Payment Was For (i.e., Mortgage, car, credit card, etc.)

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7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? *Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ No.
☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.

☐ No.
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of Payment	Total Amount Paid	Amount You Still Owe	Reason for this Payment	Relationship

PART 4.

Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No.
☐ Yes. Fill in details -- (Bring copies of any Complaints and Judgments with you to discuss with your attorney.)

Case Title (Who Is Suing You)	Case No.	Court & County Case is Filed	Nature of Case	Status (Case is pending, on appeal, etc.)

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

☐ No.
☐ Yes. Fill in the details.

Creditor Name & Address	Description of Property	Explain What Happened	Date	Value of Property

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a current payment because you owed a debt?

☐ No.
☐ Yes. Fill in the details.

Creditor Name & Address	Describe the Action Creditor Took	Date Action Was Taken	Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☐ No.
☐ Yes.

PART 5.

List Certain Gifts and Contributions.

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ No.
☐ Yes.

Date	Description of Gift (<u>Cash</u> , Household Items, Clothes, Etc.)	Value	Name of Recipient	Address

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity. <input type="checkbox"/> No. <input type="checkbox"/> Yes. Fill in the details.			
Charity's Name & Address	Description of Contribution (Cash, Household Items, Clothes, Etc.)	Dates You Contributed	Value

PART 6.

List Certain Losses.

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? <input type="checkbox"/> No. <input type="checkbox"/> Yes. Fill in the details.
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PART 7.

List of Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. <input type="checkbox"/> No. <input type="checkbox"/> Yes.			
Person Who was Paid (including address, email or website)	Description and Value of Any Property	Date Payment of Transfer was Made	Amount of Payment Received

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17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

☐ No.
☐ Yes. Fill in the details.

Person Who was Paid (including Address)	Description and Value of Any Property	Date Payment of Transfer was Made	Amount of Payment Received

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☐ No.
☐ Yes. Fill in the details.

Name and Address of Person Who Received Transfer	Person's Relationship to You	Description and Value of Property Transferred	Describe any Property or Payments Received or Debts Paid in Exchange	Date of Transfer

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

☐ No.
☐ Yes. Fill in the details.

Name of Trust	Description and Value of the Property Transferred	Date Transfer was Mad

PART 8.

List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units.

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

☐ **No.**
☐ **Yes. Fill in the details.**

Name and Address of Financial Institution	Last 4 digits of Account No.	Type of Account or Instrument (Checking, Savings, Money Market, etc.)	Date Account was Closed, sold, moved, or transferred	Last Balance before Closing or Transfer	What Did You Do with the Money

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ **No.**
☐ **Yes. Fill in the details.**

Name of Financial Institution and Address	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe Contents of the Box	Do You Still Have It?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy.

☐ **No.**
☐ **Yes. Fill in the details.**

Name of Storage Facility and Address	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the Contents	Do You Still Have It?

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PART 9:

Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Owner's Name and Address	Where is the Property Located (Provide Full Address)	Describe the Property	Value	
Questions			Yes	No
Are you storing any property for another person?				
Are you on anyone's bank accounts?				
Are you listed on the title to anyone's car?				
Are you listed on the title to anyone's home?				
Do you own or hold any property that belongs to another person or is titled in another person's name?				
If you answered Yes to any of the above questions, please describe below:				

Description of Item No. 1: _____ **Value:** _____

Full Name and Address of Other Person: _____

Relation to Debtor(s) (i.e., friend, relative, insider, note, etc.) _____

Location Where Item is Stored: _____

Explanation of Why Other Person is Storing Your Property or Why You are Storing Other Person's Property: _____

Description of Item No. 2: _____ **Value:** _____

Full Name and Address of Other Person: _____

Relation to Debtor(s) (i.e., friend, relative, insider, note, etc.) _____

Location Where Item is Stored: _____

Explanation of Why Other Person is Storing Your Property or Why You are Storing Other Person's Property: _____

IF ADDITIONAL ITEMS, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE.

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PART 10

Environmental Information.

For the purpose of Part 10, the following definitions apply:

Environmental law - means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Site - means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material - means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

Yes: ☐ No. ☐ - If Yes - please complete the following questions. If No. - Go to Question #25

Site Name & Address	Governmental Unit Name and Address	Environmental Law (if you know it)	Date of Notice

25. Have you notified any governmental unit of any release of hazardous material?

Yes: ☐ No. ☐ - If Yes - please complete the following questions. If No. - Go to Question #26

Site Name & Address	Governmental Unit Name and Address	Environmental Law (if you know it)	Date of Notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Yes: ☐ No. ☐ - If Yes - please complete the following questions. If No. - Go to Question #27

Case Title and Case Number	Court or Agency Name and Address	Nature of the Case	Status of the Case (Pending, on appeal, Concluded)

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PART 11

Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?	
<input type="checkbox"/>	A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
<input type="checkbox"/>	A member of a limited liability company (LLC) or limited liability partnership (LLP).
<input type="checkbox"/>	A partner in a partnership.
<input type="checkbox"/>	An officer, director, or managing executive of a corporation.
<input type="checkbox"/>	An owner of at least 5% of the voting or equity securities of a corporation
Yes: <input type="checkbox"/> No: <input type="checkbox"/> - If Yes - please complete the following questions. If No. - Go to Question #28	

Full/Exact Name of Business #1		Business Address		City, State & Zip		Title Held in Business (President, Secretary, Partner, etc.,)
Nature of Business	Percentage or Amount of Stock Owned	Membership Interest in Business	Beginning Date of Business	Ending Date of Business	Taxpayer ID	Type of Entity (i.e., Corporation, Limited Liability Company, Sole Proprietorship, etc.)

Full/Exact Name of Business #2		Business Address		City, State & Zip		Title Held in Business (President, Secretary, Partner, etc.,)
Nature of Business	Percentage or Amount of Stock Owned	Membership Interest in Business	Beginning Date of Business	Ending Date of Business	Taxpayer ID	Type of Entity (i.e., Corporation, Limited Liability Company, Sole Proprietorship, etc.)

IF ADDITIONAL INFORMATION TO ANY OF THE ABOVE, PLEASE PROVIDE THE ABOVE INFORMATION ON A SEPARATE PAGE AND INSERT THAT PAGE BEHIND THIS PAGE

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28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Name	Address	City, State, Zip	Date Provided with Financial Statement

30. Special Circumstances or Emergencies

Yes	No	Question
		Are you facing a foreclosure? If Yes: Date of Foreclosure Sale:
		Are you being garnished or think you soon will be?
		Do you have IRS Liens or think you soon will have?
		Have you been sued or think you soon will be?
		Do you have a trial date scheduled within the next 90 days for any lawsuits pending against you?
		Have you taken any cash advances on your credit cards in the last 6 months? If Yes - Approximate total: \$
		Are you in a divorce proceeding or think that you soon will be?
		Have you done any balance transfers from one credit card to another within the last year?
		Have you used your credit cards within the last ninety (90) days?
		Has the total owed on your credit cards gone up significantly in the last 6 months?
		Have you obtained any credit cards in the last 6 months?
		Do you have credits cards or loans with your current bank?
		Have you ever paid dues?
		Have you ever been convicted of any felony?

Yes	No	Question
		Has any of your property been repossessed or do you think it soon will be?
		Have you taken out any payday loans? If yes, be sure to list them in the unsecured creditor section.
		Have you written any checks which have been dishonored for insufficient funds?
		Do you have any serious health problems?
		Have you resided in your State for the past ninety (90) days?
		Are you considering bankruptcy for yourself only?
		Are you considering bankruptcy for both yourself and your spouse?
		Do you own or operate a business?
		Could any person make a claim against you due to your driving while intoxicated?
		Could any person make a claim against you for fraud, physical injury or any other conduct which might constitute a crime under the laws of any state, even if you deny it?
		Do you have any unusual circumstances, questions, or comments you think should be brought to the lawyer's attention? Please describe:

How did you find out about our office?						
Yellow Pages Ad	Referral from Personal Friend	Internet	I Am Personal Friend of Attorney or Staff	Another Lawyer	Referral from Former Client	Other:
_____	(Name) _____	_____	Name of Attorney/ Staff Member _____	Name of Lawyer: _____	Name of Former Client: _____	_____

WHEN YOU HAVE COMPLETED THE FORM, SIGN IT AND BRING IT WITH YOU TO YOUR APPOINTMENT

The answers to these questions are true and accurate to the best of my knowledge.
(Both spouses need to sign if this is a joint filing).

Sign Here

Sign Here

Print Signor's Name Here

DATE: _____

Print Signor's Name Here

DATE: _____