



Macomb County Location:
49 Macomb Place, Ste. 27
Mt. Clemens, MI 48043

Oakland County Location:
15900 W. 10 Mile Rd., Ste. 201
Southfield, MI 48075

Tel: 866-552-9210

e-mail: Info@CicchelliLawOffice.com

www.CicchelliLawOffice.com

Date: _____

BANKRUPTCY QUESTIONNAIRE

Please print all of your answers completely and legibly. Please complete all questions with detailed answers, including complete addresses and account numbers for your creditors. IF YOU DO NOT PROVIDE OUR OFFICE WITH A COMPLETE ADDRESS AND ACCOUNT NUMBER FOR EACH CREDITOR, THAT DEBT MAY NOT BE DISCHARGED FROM YOUR BANKRUPTCY.

Please answer each question fully. If it does not apply to you or the answer is none, please write N/A in the space provided. If the questionnaire is not completed fully, it may delay the filing of your case.

How did you hear about our firm: _____

DEBTOR 1 INFORMATION:

DEBTOR 2 (SPOUSE) INFORMATION:

FULL NAME: _____

FULL NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY & ZIP CODE: _____

CITY & ZIP CODE: _____

COUNTY: _____

COUNTY: _____

PHONE: _____

PHONE: _____

CELL: _____

CELL: _____

WORK: _____

WORK: _____

Email: _____

Email: _____

LENGTH AT RESIDENCE: _____

LENGTH AT RESIDENCE: _____

SS #: _____

SS #: _____

D/O/B: _____

D/O/B: _____

Drivers License #: _____

DriversLicense #: _____

Other Names Used in Last 6 Years

Other Names Used in Last 6 Years

Has either of you filed a bankruptcy before? _____ If yes, when and where _____

Chapter: _____ Case No.: _____ Judge: _____ District: _____

Disposition: _____

MARITAL STATUS: ___ Single ___ Married ___ Separated ___ Divorced ___ Widowed



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DEPENDENT INFORMATION:

GENDER (boy or girl)	AGE
_____	_____
_____	_____
_____	_____
_____	_____

EMPLOYER INFORMATION:

DEBTOR 1:

Employer Name: _____

Address: _____ City, State Zip _____

Phone Number: _____

Position: _____ Length of Employment: Start Date _____
End Date _____
(if applicable)

If more than one employer, please provide information about other employers:

DEBTOR 2 (Spouse):

Employer Name: _____

Address: _____ City, State Zip _____

Phone Number: _____

Position: _____ Length of Employment: Start Date _____
End Date _____
(if applicable)

If more than one employer, please provide information about other employers:



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UNEMPLOYMENT COMPENSATION: Have you received any unemployment compensation for the last two years? If so, please provide dates and amounts of the unemployment benefits.

Two horizontal lines for providing unemployment compensation details.

BUDGET QUESTIONS:

Gross wages PER PAY CHECK (please select only one pay period per Debtor)

DEBTOR 1:

DEBTOR 2 (Spouse):

- Weekly
Every Two Weeks
Twice Monthly
Monthly
Other (Explain)

- Weekly
Every Two Weeks
Twice Monthly
Monthly
Other (Explain)

How much are you paid per Pay check? (BEFORE TAXES)
Amount of overtime per Pay period, if any?
DEBTOR 1:
DEBTOR 2 (Spouse):

Deductions per pay period
Payroll Taxes and Social Security Insurance (health & life)
Union Dues
Other Deductions (Explain)

OTHER INCOME PER MONTH:
If self-employed, regular income:
Income from real property:
Interest and dividends:
Social Security or other
Government assistance:
Pensions or retirement:



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Spousal support received: \$
Child support received: \$
Other income: (Explain in detail)
TOTAL MONTHLY NET INCOME: \$

MONTHLY EXPENSES:

Rent/Mortgage: \$
Are your property taxes included? If not, state amount \$
Is property insurance included? If not, state amount \$
Home Maintenance \$
Electricity and gas (DTE & Consumers) \$
Water and sewer \$
Telephone \$
Cell phone \$
Security System \$
Cable \$
Internet Service \$
Other Utilities (Explain) \$
Groceries \$
Clothing \$
Laundry/Dry Cleaning \$
Medical/Dental \$
Transportation \$
Entertainment/Magazines \$
Charitable Contributions \$
Renters Insurance \$
Life Insurance \$
Health Insurance \$
Auto Insurance \$
Other Insurance (Explain) \$
Taxes not deducted from wages or included in home Mortgage payments. (Specify) \$



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Installment Payments:

Table with 2 columns: Expense Category and Amount. Rows include Automobile, Others (Explain), Pet/Animal Care, Child Care, Alimony/support paid to others, Personal Hygiene, Cleaning Products/toiletries, Payments for support of additional dependents, Other Expense, and TOTAL MONTHLY EXPENSES.

PROPERTY QUESTIONS:

Please complete this section with "market values" on all property that you own. Please base your answers on the garage sale value of your property.

PROPERTY:

MARKET VALUE:

- 1. Real Estate: Address: MARKET VALUE: \$
2. Cash on hand MARKET VALUE: \$
3. Checking Account Bank Name and Account Number: MARKET VALUE: \$
Savings Account Bank Name and Account Number: MARKET VALUE: \$
4. Household goods: MARKET VALUE: \$
Bed Room Set \$ Dining Room Set \$



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Living Room Set \$ TV's, DVD, VCR \$

Appliances \$ Lawn Equipment \$

5. Valuable books, pictures, collections, etc \$ _____

6. Clothing and personal effects \$ _____

7. Furs and Jewelry \$ _____

8. Automobiles/Boats/RV's/Motorcycle:

_____ year _____ make _____ model _____ miles \$ _____

_____ year _____ make _____ model _____ miles \$ _____

9. Firearms, sports and other hobby equipment \$ _____

PROPERTY QUESTIONS:

Please complete this section with "market values" on all property that you own. Please base your answers on the garage sale value of your property.

PROPERTY:

MARKET VALUE:

10. Retirement Funds (explain in detail)
_____ \$ _____

11. Cash value on insurance policies
Name of policy _____ \$ _____

12. Annuities, IRAS, ERISA and Keough Plans (please circle) \$ _____

13. Stocks, Bonds or CD'S (please circle one) \$ _____

14. Tax refund for last year (Already received? _____) \$ _____



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- 15. Office Equipment \$ _____
- 16. Time Share \$ _____
Location: _____
- 17. Potential Recovery from Lawsuit \$ _____
- 18. Potential Recovery from Inheritance \$ _____
- 19. Does anyone owe you any money? \$ _____
- 20. Are you expecting a buyout or early retirement from your employer or previous employer? \$ _____
- 21. Do you have a Security Deposit with a Landlord? \$ _____
- 22. Tools of Trade (If you own a business) \$ _____
- 23. Other personal property not listed \$ _____

STATEMENT OF FINANCIAL AFFAIRS:

Each question must be answered, if it does not apply write N/A or None. If each question is not answered completely, this will delay your filing.

- 1. State the gross amount of income the debtor received from employment, trade or profession or from operation of the debtors business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the 2 years immediately preceding this calendar year if a joint petition is filed, state income for each spouse separately.

Present YTD \$ _____

Present YTD \$ _____

Source _____

Source _____

Two Years Prior Income:

Year ____ \$ _____

Year ____ \$ _____

Source _____

Source _____

Year ____ \$ _____

Year ____ \$ _____

Source _____

Source _____



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2. State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately.

3. List all payments on loans, installments purchases of goods or services, and other debts totaling more than \$600.00 to any individual creditor made within **90 days** before the beginning of this case. **(For example if you paid a single creditor \$200.00 monthly for 3 months consecutively)**
 - a. Name of Creditor
 - b. Account Number
 - c. Payment Dates
 - d. Payment Amounts

4. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) **(Have you paid any friends or family members \$600.00 or more in the last year.)**

5. List all cash advances or charges made within **90 days** prior to the beginning of this case.

6. List all lawsuits to which the debtor is/was a party within **one year**. Please include the case number and attorney name and address involved in this lawsuit.

7. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately prior to the filing of this case.



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8. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year**.
9. Describe any assignment of property for the benefit of creditors made within **120 days** prior to the filing of this case.
10. List all property, which has been in the hands of a custodian, receiver, or court-appointed official within **one year** prior to the filing of this case.
11. List all gifts or charitable contributions made within **one year** prior to the filing of this case except ordinary and usual gifts to family members totaling less than \$200.00 in value per individual family member and charitable contributions totaling less than \$100.00 per recipient.
12. List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor, which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)
13. List all losses from fire, theft, other casualty or gambling within **one year**.
14. Are you currently in a lease? Auto/ Residential
15. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security



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within **two year** prior to the filing of this case. **(Have you sold any vehicles, real estate, jewelry, furniture and etc.? Please disclose now)**

16. List all safe deposit boxes in which the debtor has or had securities, cash or other valuables within one year prior to the filing of this case.
17. List all property owned by another person that the debtor holds or controls. (Example: You drive a vehicle that belongs to another person.)
18. If you have moved within the last **three years**, list all addresses and the dates in which you lived there.
19. Do you have any winning lottery tickets in your possession?
20. Does anyone owe you any money?
21. Are you expecting an inheritance?
22. Do you have any reason to sue anyone?
23. Are you expecting a buyout or early retirement?
24. If the debtor is an individual, list the names and addresses of all businesses in which the debtor was an officer, director, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employment professional within the **two years** prior to filing this case.



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25. If the debtor is a partnership, list the names and addresses of all businesses in which the debtor was a partner or owned 5 percent or more of the voting securities, within the **two years** prior to filing this case.

26. List all bookkeepers and accountants who within the **six years** prior to filing this case kept or supervised the keeping of books of account and records of the debtor.

27. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

I certify that the information given above is true and correct to the best of my knowledge and the same is true for pages 1 through 13 of this questionnaire and my listing of creditors is complete to the best of my knowledge.

DATE: _____

Signature: _____

Signature: _____



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WHAT IS A SECURED CREDITOR:

A secured creditor is anyone who has a secured interest in collateral. If you intend to keep any secured items, you will be required to pay for them.

- Example:
- ABC Mortgage – you purchased a home
 - GMAC – you purchased a car
 - ITT Financial – you put your 1985 automobile as collateral on a note
 - Beneficial – you put up household goods as collateral
 - Zales – you purchased items from a jewelry store
 - Room Store – you purchased furniture
 - Some credit cards used for making purchases such as appliances, Furniture, computers, jewelry, etc.
 - Student Loans – all government student loans are secured and must be paid back unless they have been due for over 7 years.
 - Taxes – taxes are secured unless they are property taxes on a home you are surrendering in the bankruptcy.

WHAT IS AN UNSECURED CREDITOR:

An unsecured debt is one without collateral.

- Example:
- Most credit cards when used to purchase misc. items
 - Services rendered – medical expenses, repair work around the house, dental expenses, etc.
 - Subscriptions – books, magazines, etc.
 - Signature loans – no collateral used to obtain a loan



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SECURED CREDITORS

HOME MORTGAGE:

Address of property: _____

Mortgage Company Name: _____

Address: _____

City, State, Zip _____

Account Number: _____

Balance Due \$ _____ Market Value\$ _____

Will you keep home? _____ Yes _____ No

Monthly Payment \$ _____ Late Fees \$ _____

Are payments behind? _____ Yes _____ No How many months behind? _____

What year was this mortgage taken out? _____

Name(s) on Mortgage: _____

Name(s) on Deed: _____

2nd LIEN

Mortgage Company Name: _____

Address: _____

City, State, Zip _____

Account Number: _____

Balance Due \$ _____ Market Value\$ _____

Will you keep home? _____ Yes _____ No



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Monthly Payment \$ Late Fees \$

Are payments behind? Yes No How many months behind?

What year was this 2nd mortgage taken out?

Name(s) on Mortgage:

VEHICLE LOANS NO 1:

Creditor Name: Account No

Address:
City, State, Zip

Phone No Will you Keep? Yes No

Balance Due: \$ Market Value: \$

Year Make/Model Mileage

Monthly Payments \$ Late Fees \$

Are payments behind? Yes No How many months behind?

What month and year was this loan taken out?

Term of Loan:

VEHICLE LOANS NO 2:

Creditor Name: Account No

Address:
City, State, Zip

Phone No Will you Keep? Yes No

Balance Due: \$ Market Value: \$

Year Make/Model Mileage

Monthly Payments \$ Late Fees \$



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Are payments behind? _____ Yes _____ No How many months behind? _____

What month and year was this loan taken out? _____

Term of Loan: _____

VEHICLE LOANS NO 3:

Creditor Name: _____ Account No _____

Address: _____

City, State, Zip _____

Phone No _____ Will you Keep? _____ Yes _____ No

Balance Due: \$ _____ Market Value: \$ _____

Year _____ Make/Model _____ Mileage _____

Monthly Payments \$ _____ Late Fees \$ _____

Are payments behind? _____ Yes _____ No How many months behind? _____

What month and year was this loan taken out? _____

Term of Loan: _____

ALL OTHER SECURED LOANS (furniture, appliances, jewelry, signature loans, etc)

Example (Art Van, Gardner White, Dell Computer, Best Buy and Etc.)

Creditor Name: _____ Account No _____

Address: _____

City, State, Zip _____

Balance Due: \$ _____ Market Value: \$ _____

Phone No _____ Will you Keep? _____ Yes _____ No

Items Purchased _____



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Date Purchased _____ Monthly Payment \$ _____

Creditor Name: _____ Account No _____

Address: _____

City, State, Zip _____

Balance Due: \$ _____ Market Value: \$ _____

Phone No _____ Will you Keep? _____ Yes _____ No

Items Purchased _____

Date Purchased _____ Monthly Payment \$ _____

Creditor Name: _____ Account No _____

Address: _____

City, State, Zip _____

Balance Due: \$ _____ Market Value: \$ _____

Phone No _____ Will you Keep? _____ Yes _____ No

Items Purchased _____

Date Purchased _____ Monthly Payment \$ _____

TAXES INFORMATION (unpaid and/or past due)

Creditor Name: _____

Address: _____

City, State, Zip _____

SS# or Tax ID#: _____ Balance Owed \$ _____

What type of tax? _____



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UNSECURED CREDITORS

Creditor Name: _____	Check reason for debt
Address: _____	Credit Card _____
City, State, Zip: _____	Signature Loan _____
Account Number: _____	Services Rendered _____
Date(s) debt was incurred _____	Other (Explain) _____

Balance Due \$ _____	Phone No. _____
Whose name? Husband _____ Wife _____ Joint _____ Other _____	
Creditor Name: _____	Check reason for debt
Address: _____	Credit Card _____
City, State, Zip: _____	Signature Loan _____
Account Number: _____	Services Rendered _____
Date(s) debt was incurred _____	Other (Explain) _____

Balance Due \$ _____	Phone No. _____
Whose name? Husband _____ Wife _____ Joint _____ Other _____	

Creditor Name: _____	Check reason for debt
Address: _____	Credit Card _____
City, State, Zip: _____	Signature Loan _____
Account Number: _____	Services Rendered _____
Date(s) debt was incurred _____	Other (Explain) _____

Balance Due \$ _____	Phone No. _____
Whose name? Husband _____ Wife _____ Joint _____ Other _____	

UNSECURED CREDITORS

Creditor Name: _____	Check reason for debt
Address: _____	Credit Card _____
	Signature Loan _____



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City, State, Zip: _____

Services Rendered _____

Other (Explain) _____

Account Number: _____

Date(s) debt was incurred _____

Balance Due \$ _____ Phone No. _____

Whose name? Husband _____ Wife _____ Joint _____ Other _____

Creditor Name: _____

Check reason for debt

Credit Card _____

Address: _____

Signature Loan _____

City, State, Zip: _____

Services Rendered _____

Other (Explain) _____

Account Number: _____

Date(s) debt was incurred _____

Balance Due \$ _____ Phone No. _____

Whose name? Husband _____ Wife _____ Joint _____ Other _____

Creditor Name: _____

Check reason for debt

Credit Card _____

Address: _____

Signature Loan _____

City, State, Zip: _____

Services Rendered _____

Other (Explain) _____

Account Number: _____

Date(s) debt was incurred _____

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Whose name? Husband _____ Wife _____ Joint _____ Other _____

UNSECURED CREDITORS

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Check reason for debt

Credit Card _____

Address: _____

Signature Loan _____

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Services Rendered _____

Other (Explain) _____

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Balance Due \$ _____ Phone No. _____
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Creditor Name: _____ Check reason for debt
Credit Card _____
Address: _____ Signature Loan _____
City, State, Zip: _____ Services Rendered _____
Other (Explain) _____
Account Number: _____

Date(s) debt was incurred _____

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Creditor Name: _____ Check reason for debt
Credit Card _____
Address: _____ Signature Loan _____
City, State, Zip: _____ Services Rendered _____
Other (Explain) _____
Account Number: _____

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UNSECURED CREDITORS

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Credit Card _____
Address: _____ Signature Loan _____
City, State, Zip: _____ Services Rendered _____
Other (Explain) _____
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Check reason for debt

Address: _____

Credit Card _____

City, State, Zip: _____

Signature Loan _____

Account Number: _____

Services Rendered _____

Other (Explain) _____

Date(s) debt was incurred _____

Balance Due \$ _____ Phone No. _____

Whose name? Husband _____ Wife _____ Joint _____ Other _____

Creditor Name: _____

Check reason for debt

Address: _____

Credit Card _____

City, State, Zip: _____

Signature Loan _____

Account Number: _____

Services Rendered _____

Other (Explain) _____

Date(s) debt was incurred _____

Balance Due \$ _____ Phone No. _____

Whose name? Husband _____ Wife _____ Joint _____ Other _____

UNSECURED CREDITORS

Creditor Name: _____

Check reason for debt

Address: _____

Credit Card _____

City, State, Zip: _____

Signature Loan _____

Account Number: _____

Services Rendered _____

Other (Explain) _____

Date(s) debt was incurred _____

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Address: _____

Credit Card _____

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Credit Card _____

Address: _____

Signature Loan _____

City, State, Zip: _____

Services Rendered _____

Other (Explain) _____

Account Number: _____

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Check reason for debt

Credit Card _____

Address: _____

Signature Loan _____

City, State, Zip: _____

Services Rendered _____

Other (Explain) _____

Account Number: _____

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Check reason for debt

Credit Card _____

Address: _____

Signature Loan _____

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Services Rendered _____

Other (Explain) _____

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Balance Due \$ _____ Phone No. _____
Whose name? Husband _____ Wife _____ Joint _____ Other _____

Creditor Name: _____

Check reason for debt

Address: _____

Credit Card _____

City, State, Zip: _____

Signature Loan _____

Services Rendered _____

Account Number: _____

Other (Explain) _____

Date(s) debt was incurred _____

Balance Due \$ _____ Phone No. _____
Whose name? Husband _____ Wife _____ Joint _____ Other _____