



## MOTOR VEHICLES AND RECREATIONAL VEHICLES

### Vehicle #1

\_\_\_\_\_ \$ \_\_\_\_\_  
Description (Year, Make, and Model) Kelley Blue Book Value Creditor name  
(See [www.kbb.com](http://www.kbb.com))

\$ \_\_\_\_\_ \$ \_\_\_\_\_ # of payments behind Loan Date  
Total balance due Monthly payment

Current desire (keep or surrender property): \_\_\_\_\_

### Vehicle #2

\_\_\_\_\_ \$ \_\_\_\_\_  
Description (Year, Make, and Model) Kelley Blue Book Value Creditor name  
(See [www.kbb.com](http://www.kbb.com))

\$ \_\_\_\_\_ \$ \_\_\_\_\_ # of payments behind Loan Date  
Total balance due Monthly payment

Current desire (keep or surrender property): \_\_\_\_\_

**\*Additional Vehicles** (same questions apply; It is particularly important that we know how many cars you have, and how much equity you have in each car. If your child's car is still in your name, or you are on your parent's vehicle for estate planning purposes, be sure to list that car here so we can discuss it.)

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**ADDITIONAL DEBT ESTIMATES** (note that you must list all of your debts on your final bankruptcy Schedules: it is a serious crime to intentionally fail to do so! What you are filling out here are not your Schedules, but this information is intended to give us an idea of whether we can help you):

1. Tax Debt: \$ \_\_\_\_\_ (these probably won't be discharged, but you must list them anyway!)
2. Student Loans: \$ \_\_\_\_\_ (these will not be discharged, but you must list them anyway!)
3. Child support or alimony: \$ \_\_\_\_\_ (these also won't be discharged, but must be listed!)
4. Unsecured: \$ \_\_\_\_\_ (such as credit card debt, medical bills, and personal loans)
  - a. Approximately how many unsecured creditors do you have? \_\_\_\_\_
  - b. Approximately how much do you pay per month to unsecured creditors? \$ \_\_\_\_\_
5. Other Debts: \$ \_\_\_\_\_ (any and all debts must be listed!)

### LITIGATION

Are you currently involved in any lawsuits? \_\_\_\_\_ Case No. of lawsuit: \_\_\_\_\_

Name of creditor(s) involved: \_\_\_\_\_ Date served: \_\_\_\_\_

Has a judgment been entered against you? \_\_\_\_\_ Are you being garnished? \_\_\_\_\_

### INCOME

1. Your annual gross income from employer: \$ \_\_\_\_\_ (gross; that's before any deductions)

Name of Employer(s): \_\_\_\_\_

2. Spouse's annual gross income from employer: \$ \_\_\_\_\_ (gross; that's before any deductions)

Name of Employer(s): \_\_\_\_\_

3. Income from operation of a business: Monthly Average: \$ \_\_\_\_\_ Total in last 6 mos.: \$ \_\_\_\_\_
4. Income from social security (including SSDI): Monthly: \$ \_\_\_\_\_
5. Income from pension: Monthly: \$ \_\_\_\_\_
6. Income from unemployment: Monthly: \$ \_\_\_\_\_
7. Number of People Living in Your Home (including you): \_\_\_\_\_ If the other household members are contributing to expenses, approximately how much (per month)? \$ \_\_\_\_\_

**DO YOU OWN A BUSINESS? IF YES, PLEASE ANSWER ALL QUESTIONS BELOW:**

Business Name: \_\_\_\_\_

Corporation                  LLC                  Partnership                  DBA/Sole Proprietorship

Current Desire (keep or close): \_\_\_\_\_

If you just closed down your business, please advise the closure date: \_\_\_\_\_

Please submit the following documents along with this Intake Worksheet for each business you own:

- Balance Sheet;
- Profit & Loss Statement; and
- Accounts Payable list with creditor names & amounts due to each.

**GENERAL CONSIDERATIONS:**

1. Have you used any of your credit cards within last 90 days? \_\_\_\_\_ If yes, how much (total)? \$ \_\_\_\_\_
2. Have you taken any cash advances from credit card(s) in the last **7 months**? \_\_\_\_\_  
If yes, how much (total)? \$ \_\_\_\_\_
3. Have you made any payments to relatives within the last one year? \_\_\_\_\_  
Amount of payment(s): \$ \_\_\_\_\_ Date(s) of payment(s): \_\_\_\_\_ Relationship: \_\_\_\_\_  
Amount of payment(s): \$ \_\_\_\_\_ Date(s) of payment(s): \_\_\_\_\_ Relationship: \_\_\_\_\_
4. Have you ever filed bankruptcy before? \_\_\_\_\_  
If yes, when? \_\_\_\_\_ What chapter? \_\_\_\_\_ Where? \_\_\_\_\_
5. Are you married? \_\_\_\_\_ If yes, what was the date of your marriage: \_\_\_\_\_
6. Have you been divorced in the past two years? \_\_\_\_\_  
If yes, please provide a copy of your Divorce Decree (and Property Settlement Agreement, if separate) with this Intake Worksheet.
7. Have you lived in Arizona for a FULL two years? \_\_\_\_\_  
If not, what date did you move to Arizona: \_\_\_\_\_ From what state: \_\_\_\_\_

**LAST QUESTIONS**

Is there anything special/extraordinary/unusual we should know before we decide if we can help you?

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What do you wish to achieve for yourself and your family?

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