

NAME: _____ SSN: _____ DOB: _____

SPOUSE: _____ SSN: _____ DOB: _____

ADDRESS: _____ OTHER NAMES USED _____ HOW LONG IN AL? _____
LAST 6 YEARS: _____
1ST TEL # _____ 2ND _____

MARRIED? _____ SPOUSE OR EX-SPOUSE: _____ SEP. OR DIV. _____

ALIMONY OR SUPPORT \$ _____ PAID _____ REC'D _____ #DEP. _____

EMPLOYER: _____ SPOUSE'S EMPL. _____

ADDRESS: _____ ADDRESS: _____

TEL # _____ BADGE # _____ TEL # _____ BADGE # _____

YRS. EMP. _____ TYPE OF WORK: _____ YRS EMP. _____ TYPE OF WORK: _____

PREV. EMP. _____ PREV. EMP. _____

GROSS EARNINGS: \$ _____ PER _____ GROSS EARNINGS: \$ _____ PER _____

NET EARNINGS \$ _____ PER _____ NET EARNINGS \$ _____ PER _____

OTHER INCOME \$ _____ PER _____ OTHER INCOME \$ _____ PER _____

SOURCE: _____ SOURCE: _____

DEDUCTIONS BY EMPLOYER:

401-K \$ _____ PER _____

401-K LOAN \$ _____ PER _____ BAL. \$ _____ 401-K LOAN \$ _____ PER _____ BAL. \$ _____

GROSS INCOME LAST YEAR \$ _____ GROSS INCOME LAST YEAR \$ _____

HAVE YOU EVER FILED A BANKRUPTCY PETITION (CHAPTER 7)? _____ HOW MANY TIMES/DATES: _____

HAVE YOU EVER FILED A BANKRUPTCY PETITION (CHAPTER 13)? _____ HOW MANY TIMES/DATES: _____

MOTOR VEHICLES: OWN _____ BUYING _____ HOME OR MOBILE HOME: OWN _____ BUYING _____

YR. & MODEL (1) _____ PAYMENTS 1ST MTG. \$ _____

YR. & MODEL (2) _____ PRINCIPAL BAL. 1ST MTG. \$ _____

PAYMENTS: (1) \$ _____ HOW MANY LEFT: _____ INT% _____ TO WHOM: 1ST MTG _____

PAYMENTS: (2) \$ _____ HOW MANY LEFT: _____ INT% _____ PAYMENTS 2ND MTG \$ _____

PRINCIPAL BAL. 2ND MTG. \$ _____

TO WHOM: (1) _____ TO WHOM: 2ND MTG _____

TO WHOM: (2) _____

BALANCE: (1) \$ _____ ORIGINAL COST: \$ _____

BALANCE: (2) \$ _____ APPROX DATE OF PURCHASE: _____

VALUE: (1) \$ _____ EST. CURRENT MARKET VALUE: \$ _____

VALUE: (2) \$ _____ RENT: \$ _____ PER MONTH

I ATTEST TO THE FOREGOING TO BE TRUE AND CORRECT ON THIS THE _____ DAY OF _____

PERSONAL PROPERTY**DESCRIPTION****VALUE**

1. CASH
2. CHECKING/SAVINGS
3. SECURITY DEPOSIT
4. HOUSEHOLD GOODS
5. COLLECTIONS
6. CLOTHING
7. FURS & JEWELRY
8. FIREARMS/HOBBY
9. INSURANCE VALUE
10. ANNUITY
11. EDUCATIONAL RETIREMENT
12. OTHER RETIREMENTS
13. STOCKS
14. PARTNERSHIP
15. BONDS
16. ACCOUNTS RECEIVABLES
17. ALIMONY
18. TAX REFUNDS
19. FUTURE INTERESTS
20. ESTATES
21. CLAIMS YOU HAVE AGAINST OTHERS
22. COPYRIGHTS/PATENTS
23. LICENSES/ FRANCHISES
24. CUSTOMER LISTS
25. AUTOMOBILES

26. BOATS
27. AIRCRAFT
28. OFFICE EQUIPMENT/FURNISHINGS
29. MACHINERY/EQUIPMENT IN BUSINESS
30. INVENTORY
31. ANIMALS
32. CROPS
33. FARMING EQUIPMENT
34. FARM SUPPLIES/CHEMICALS
35. OTHER

ED STUCKENSCHNEIDER, P.C.

EXPENSES

Complete this schedule by estimating the average monthly expenses of you and your family.

| | |
|---|-------------------|
| Rent or home mortgage payment (include lot rented for mobile home) | \$ _____ |
| Are real estate taxes included? Yes _____ No _____ If no, how much | \$ _____ |
| Is property insurance included? Yes _____ No _____ If no, how much | \$ _____ |
| Utilities (Electricity and gas) | \$ _____ |
| Water and Sewer | \$ _____ |
| Telephone | \$ _____ |
| Cable | \$ _____ |
| Pest Control | \$ _____ |
| Security | \$ _____ |
| Other _____ | \$ _____ |
| Home Maintenance (Repairs and Upkeep) | \$ _____ |
| Food | \$ _____ |
| Lunches (eating out) | \$ _____ |
| Clothing | \$ _____ |
| Laundry and dry cleaning | \$ _____ |
| Medical and dental expenses (Doctor visits, prescriptions, etc.) | \$ _____ |
| Auto Expense (gasoline, oil changes, repairs) (do not include car payments) | \$ _____ |
| Recreation, clubs, and entertainment, newspapers, magazines, etc. | \$ _____ |
| Charitable contributions | \$ _____ |
| Insurance (not deducted from wages or included in home mortgage payment) | \$ _____ |
| Homeowner's or renter's | \$ _____ |
| Life | \$ _____ |
| Health | \$ _____ |
| Auto | \$ _____ |
| Other | \$ _____ |
| Personal items (toiletries, etc.) | \$ _____ |
| Alimony, maintenance, and 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) | \$ _____ |
| School expenses | \$ _____ |
| TOTAL | (\$ _____) |

