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CLIENT QUESTIONNAIRE

Thank you very much for retaining **The Law Office of JUAN J. PILES, ESQUIRE** for your legal needs. Please fill out this form as completely as possible so we can provide you with helpful and accurate advice.

Under the law, you must list each and every debt, including debts to friends and relatives. If you need more space, please use the back side of the paper. Please also remember to list every creditor to whom you are obligated. Similarly, you should list debts even if you think the creditor has written off the loan or if you think that someone else may pay the bill in the future.

Under the new Bankruptcy Law, you will be asked to provide documentation of your debts and your expenses. We need copies of the following:

- **All credit card statements;**
- **All collection company letters;**
- **All medical bills;**
- **2008 AND 2009 complete tax returns;**
- **Proof of Income: last sixty (60) days paystubs OR unemployment checks OR social security checks OR disability checks;**
- **Copy of any Closing Statements for any real estate purchased within the last two (2) years AND any Warranty Deeds to any and all real estate you own;**
- **Copy of auto registration, title and insurance, if you have a car in your name;**
- **Last three months bank statements;**
- **Copy of any retirement account (401k, IRA, 403B, etc.) statement for the last sixty (60) days;**
- **Copies of any lawsuits against you, including, repossessions, foreclosures, small claims, etc.;**
- **Payoff statement from Lender for any mortgage that you are a mortgagor; and**
- **Payoff statement from Lender for any vehicles financed.**

We ask that you complete this questionnaire to the best of your ability. We do need all of the information requested to accurately file the petition and avoid any excessive questions at the time of the 341 creditor hearing.

Finally, you are required to take an online Pre-Filing Credit Course **before** we file your bankruptcy. You will also need to take an online Pre-Discharge Debtor Education Course **after** the filing of the petition. Here is the website we recommend to our clients: <http://www.personalfinanceeducation.com>

Again, thank you for choosing **The Law Office of JUAN J. PILES, ESQUIRE**. We will make every effort to see to it that your experience as our client is a pleasant one and that all of your questions are answered and all of your concerns are put to ease.

PERSONAL INFORMATION

Today's date: _____

Your Name (as it appears on Soc. Sec. Card): _____ Date of Birth: _____

Maiden name/former names: _____

Social Security Number: _____ Marital status: _____

Your address: _____ Apt. #: _____ Rent Own

City: _____ State: _____ Zip: _____ County: _____

Home phone: _____ Work phone: _____ Cell/Beeper: _____

E-Mail address: _____

Name and # of someone who could reach you in an emergency: _____

Spouse's Name: _____ Date of birth: _____ E-mail: _____

Spouse's maiden/former name: _____

Spouse's social security number: _____ Spouse's work phone: _____

Spouse's home address and home phone (if different from yours): _____

How long have you lived at your home address: _____

If less than 2 years, please list previous addresses, beginning with the most recent:

Dates:

Dates:

Income Information

Marital Status: _____

Yourself

Spouse

Job title/occupation: _____

Employer: _____

How long there: _____

Payroll address: _____

City, ST Zip _____

Payroll office phone #: _____

Date next paycheck
expected _____

Children & Step-children

Name	Age	Relationship	Does child live with you?	Child support \$ paid/received

Expected changes in income:

Describe when & why: _____

Income & Expenses

The new bankruptcy law requires that we analyze the household income. **Please photocopy each and every pay stub for the past three months and attach.** If you have income from other sources during this period (**unemployment**, dividends, one-time payments, etc.), please photocopy whatever documentation you have.

If you are self employed, you will need a spreadsheet detailing gross income, itemized business expenses and other deductions.

Household Expenses – the Bankruptcy Courts now require supporting documentation for all claimed expenses. Please save receipts.

	Household expenses	Attorney's Notes
Rent/mortgage payments	_____	_____
Electric bill	_____	_____
Gas bill	_____	_____
Water/sewer	_____	_____
Telephone	_____	_____
Cell phone #1	_____	_____
Cell phone #2	_____	_____
Cell phone #3	_____	_____
Internet service	_____	_____
Cable TV	_____	_____
Home maintenance	_____	_____
Food	_____	_____
Clothing	_____	_____
Laundry/dry cleaning	_____	_____
Medical/dental (deductibles and non-reimbursed only)	_____	_____

Gasoline/bus fare	_____	_____
Oil changes/tires	_____	_____
Charity/church (receipts will be needed)	_____	_____
Personal property insurance	_____	_____
Real property insurance	_____	_____
Life insurance	_____	_____
Disability insurance	_____	_____
Long term care insurance	_____	_____
Health insurance (not deducted from pay)	_____	_____
Auto insurance	_____	_____
Non-payroll taxes	_____	_____
County property tax (if <u>not</u> escrowed)	_____	_____
Car/truck payment #1	_____	_____
Car/truck payment #2	_____	_____
Car/truck payment #3	_____	_____
Alimony paid	_____	_____
Child support paid out	_____	_____
Education expenses (child must be <18)	_____	_____
Child care expenses (receipts needed)	_____	_____
Care for elderly	_____	_____

Emergency matters . . .

Are you currently facing a mortgage foreclosure: _____

If so, how do you know: _____

For what month is the foreclosure scheduled: _____

Are you currently facing a vehicle repossession: _____

If so, who is the finance company? _____

How far are you behind? _____

Yearly income

Year	Gross income/year	Where employed?	Spouse's gross income/year	Where was spouse employed?
2010 (year to date)				
2009				
2008				

Tax returns (please attach copies)

Year	Tax returns filed?	If not, why not	Spouse filed tax returns?	If not, why not?
2009				
2008				

Has the IRS, State of Florida or any other taxing entity ever advised you that a tax lien has been filed against you?

Within the last ten (10) years, have you or your spouse **not** filed tax returns? If so, please describe:

Has a lawsuit ever been filed against you - has a sheriff's deputy ever served a summons upon you?

Lawsuit filed against you by:	Reason for lawsuit & date lawsuit served on you	County where filed	Case number	Status now

Have your wages ever been garnished?

Who is garnishing	When did garnishment begin	How much \$ taken to date	Is garnishment on-going	Who is plaintiff's lawyer?

Have you ever lost a house to a mortgage foreclosure?

Mortgage company/lender	Foreclosing law firm	When was house sold	Address of lost property	Status now

Please identify any real estate that is in your name.

Property address	Date purchased	Purchase price	Value now	Total debt owed on property	Keep or Surrender

Please identify any cars or trucks you own.

Year/make/model of vehicle & mileage	Date purchased	In whose name	Value now	Total debt owed on property	Keep or Surrender

Are you currently involved in a car accident claim, workers' compensation claim or any other claim that may result in money damages payable to you?

Please describe: _____

Please identify any bank accounts you own.

Name of bank	Checking/savings?	In whose name	Current balance	Any other loans or credit cards with this lender?

Please identify any pension, 401(k) or profit-sharing programs in which you participate

Name of financial institution	Type of plan	In whose name	Are you still contributing?	Current balance	Any loans against this plan?

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Other assets not yet described (i.e. boats, stocks/bonds, antiques, **home furnishings** (sofa, loveseat, bedroom set, dining room set, television, cameras, computers, musical instruments, valuable collections, insurance policies with cash value, guns, sporting equipment, jewelry, etc.)

Asset description	Current value	Who owns this asset?	Has asset been pledged as collateral for a loan?

Have you ever lost a car to repossession?

Car finance company	When was vehicle seized	Vehicle make/model	Have you received notice that you still owe money on vehicle?

Recent activity

During the last 60 days, have you done any of the following	Yes/No	Name of lender/transferee	Amount borrowed w/in last 60 days
Used credit cards			
Taken cash advances			
Taken out any new loans			

Gave away or sold any property worth more than \$600			
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Have you done any of the following	Yes/No	Name of person paid	Amount
Paid back a relative or business associate within last 360 days (1yr)			
Issued payment to anyone for more than \$600 within last 90 days			

Have you ever filed a Chapter 7 or a Chapter 13 bankruptcy before?

Type of bankruptcy (Ch. 7 or Ch. 13)	Date filed	Was case completed or dismissed?	When was case closed by Court	Case number	Former BK lawyer

I certify that the information I have provided in this questionnaire is true and correct, under penalty of perjury.

_____ Date _____ Signature

_____ Date _____ Signature

DISCLOSURE CERTIFICATE

I, the undersigned, hereby attest and affirm that all debts, whether joint debts, co-signed debts, claims or lawsuits for collection of debts, whether disputed or not, have been listed on my questionnaire.

I acknowledge that my attorneys rely on the information provided in this questionnaire in order to assist and advise me, and that it is my responsibility to provide my attorneys with a full, complete and accurate financial disclosure. I further agree to update my attorneys with regard to any incomplete information contained herein.

I further acknowledge that in the event a creditor is omitted from any bankruptcy petition filed by my attorneys as a result of an omission on this questionnaire, I will not have the protection of the Bankruptcy Court from actions by that creditor.

Date _____ Signature _____

Date _____ Signature _____

Avoiding Conflicts of Interest

Our law firm has represented many clients over the past several years. In very rare cases, we must

decline to accept a case because of a potential conflict of interest with another present or former client. For example, we would not be able to represent you if you are currently engaged in litigation with another of our clients.

Please advise us as to the following:

1. Are you presently married:_____ Spouse's name:_____

2. Has your spouse ever filed a bankruptcy?_____

3. Are you currently involved in a divorce or child custody case?_____

Name of opposing party:_____

4. Have you ever been divorced:_____ Name of former spouse:_____

5. Have you ever filed a lawsuit against anyone?_____

Name of the other party in this lawsuit:_____

6. Has anyone ever sued you?_____ Who:_____

Why were you sued?:_____

7. Have you ever been to Court for any reason not described above (include criminal charges, workers' compensation, social security, eviction, car accident cases, divorce or child support):

Type of case:_____

Name of opposing party:_____

What happened in this case:_____

Type of case:_____

Name of opposing party:_____

What happened in this case:_____

Taxes Due

Internal Revenue Service

Account Number: _____

Address: _____

For tax year: _____ Total taxes due to IRS for tax year: _____

Return filed? _____ In whose name: _____ Installment agreement filed? _____

Florida Dept. of Revenue

Account Number: _____

Address: _____

For tax year: _____ Total taxes due to IRS for tax year: _____

Return filed? _____ In whose name: _____ Installment agreement filed? _____

Other taxes: _____ Account number: _____

Address: _____

What type of tax is this? _____ Tax year: _____ Taxes due (total) _____

In whose name: _____ Return filed? _____

Are there any years when you did not file federal or state tax returns?

Do you have copies of your tax returns for past five (5) years? _____

Mortgages & Real Estate

First Mortgage: _____ Acct. #: _____

Address: _____ Phone #: _____ Total loan payoff: \$ _____

City: _____ ST: _____ Zip: _____ Monthly payment: _____

How many months behind are you? _____ What happened: _____

When did you take mortgage out: _____ When did you buy property: _____

Address of property: _____ Is this your residence? _____

In whose name is loan? _____ Co-signers? _____ Who is this person: _____

How much is property worth in a quick sale? _____ Has foreclosure started? _____

Who is foreclosure attorney? _____

Does payment include taxes & insurance?

Second Mortgage: _____ Acct. #: _____

Address: _____ Phone #: _____ Total loan payoff: \$ _____

City: _____ ST: _____ Zip: _____ Monthly payment: _____

How many months behind are you? _____ What happened: _____

When did you take mortgage out: _____ When did you buy property: _____

Address of property: _____ Is this your residence? _____

In whose name is loan? _____ Co-signers? _____ Who is this person: _____

How much is property worth in a quick sale? _____ Has foreclosure started? _____

Who is foreclosure attorney? _____

Cars & Trucks

Vehicle 1 – (year, make & model) _____

Finance/loan company: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

How many months behind are you? _____ What happened: _____

In whose name: _____ Co-signers: _____

Is this a lease or a purchase: _____ When was vehicle bought: _____

What is date of last payment? _____ Copy of installment note? – please provide

Vehicle 2 – (year, make & model) _____

Finance/loan company: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

How many months behind are you? _____ What happened: _____

In whose name: _____ Co-signers: _____

Is this a lease or a purchase: _____ When was vehicle bought: _____

What is date of last payment? _____ Copy of installment note? – please provide

Furniture Loans

Furniture 1 (describe furniture): _____.

Finance/loan company: _____ Acct #: _____.

Address: _____ Monthly payment: \$_____.

City: _____ ST: _____ Zip: _____ Total loan payoff: \$_____.

In whose name: _____ Co-signers: _____.

When was merchandise purchased: _____ Do you still have it? _____.

What is date of last payment? _____ Copy of installment note? – please provide

Do you want to surrender furniture and reduce or eliminate debt? _____.

Furniture 2 (describe furniture): _____.

Finance/loan company: _____ Acct #: _____.

Address: _____ Monthly payment: \$_____.

City: _____ ST: _____ Zip: _____ Total loan payoff: \$_____.

In whose name: _____ Co-signers: _____.

When was merchandise purchased: _____ Do you still have it? _____.

What is date of last payment? _____ Copy of installment note? – please provide

Do you want to surrender furniture and reduce or eliminate debt? _____.

Finance Companies and Loan Companies

Finance Company Loan 1 Did you pledge household goods (describe)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: \$_____

City:_____ ST: _____ Zip:_____ Total loan payoff: \$_____

In whose name:_____ Co-signers:_____

When did you take out loan:_____ When is last payment due?_____

Keep or surrender? _____ Copy of installment note – please provide_____

Finance Company Loan 2 Did you pledge household goods (describe)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: \$_____

City:_____ ST: _____ Zip:_____ Total loan payoff: \$_____

In whose name:_____ Co-signers:_____

When did you take out loan:_____ When is last payment due?_____

Keep or surrender? _____ Copy of installment note – please provide_____

Finance Company Loan 3 Did you pledge household goods (describe)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: \$_____

City:_____ ST: _____ Zip:_____ Total loan payoff: \$_____

In whose name:_____ Co-signers:_____

When did you take out loan:_____ When is last payment due?_____

Keep or surrender? _____ Copy of installment note – please provide_____

Loans for Jewelry, Gifts & Household Goods

Secured Creditor 1 (Describe items purchased)_____

Finance/loan company: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you take out loan: _____ When is last payment due? _____

Keep or surrender? _____ Copy of installment note – please provide _____

Secured Creditor 2 (Describe items purchased) _____

Finance/loan company: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you take out loan: _____ When is last payment due? _____

Keep or surrender? _____ Copy of installment note – please provide _____

Secured Creditor 3 (Describe items purchased) _____

Finance/loan company: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

When did you take out loan: _____ When is last payment due? _____

Keep or surrender? _____ Copy of installment note – please provide _____

Student Loans

Student Loan Creditor 1

Student loan lender: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you take out loan: _____ When is last payment?: _____

Is loan in default? _____ Is loan in deferment?: _____ When is deferment over? _____

Student Loan Creditor 2

Student loan lender: _____ Acct #: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you take out loan: _____ When is last payment?: _____

Is loan in default? _____ Is loan in deferment?: _____ When is deferment over? _____

Health Club/Spa Membership

Health Club Finance Company: _____

Address: _____ Monthly payment: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

Do you still use facility: _____ Did you sign a contract: _____

Do you want to continue to use this facility/club: _____

Credit Cards

Credit Card Lender 1: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 2: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 3: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 4: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 5: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 6: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 7: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 8: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Credit Card Lender 9: _____ Acct #: _____

Correspondence Address: _____ Monthly pymt: \$ _____

City: _____ ST: _____ Zip: _____ Total loan payoff: \$ _____

In whose name: _____ Co-signers: _____

When did you first obtain this card? _____

When is last time you used this card? _____ Total charged in last 6 months? _____

Collection agency name, address, acct #: _____

Medical Bills

Medical provider 1: _____ Acct. #: _____

Address: _____ Monthly payment: _____

City: _____ ST: _____ Zip: _____ Total balance due: _____

In whose name: _____ Co-signers: _____

Do you still use this health care provider? _____ When last used: _____

Collection agency name, address, acct # _____

Medical provider 2: _____ Acct. #: _____

Address: _____ Monthly payment: _____

City: _____ ST: _____ Zip: _____ Total balance due: _____

In whose name: _____ Co-signers: _____

Do you still use this health care provider? _____ When last used: _____

Collection agency name, address, acct # _____

Medical provider 3: _____ Acct. #: _____

Address: _____ Monthly payment: _____

City: _____ ST: _____ Zip: _____ Total balance due: _____

In whose name: _____ Co-signers: _____

Do you still use this health care provider? _____ When last used: _____

Collection agency name, address, acct # _____