Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
District of	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

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. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your First name First name government-issued picture identification (for example, Middle name Middle name your driver's license or passport). Last name Last name Bring your picture identification to your meeting Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) with the trustee. 2. All other names you First name First name have used in the last 8 years Middle name Middle name Include your married or maiden names and any Last name Last name assumed, trade names and doing business as names. First name First name Do NOT list the name of any separate legal entity such as Middle name Middle name a corporation, partnership, or LLC that is not filing this Last name petition. Last name Business name (if applicable) Business name (if applicable) Business name (if applicable) Business name (if applicable) 3. Only the last 4 digits of your Social Security number or federal OR OR **Individual Taxpayer** 9 xx - xx -_ 9 xx - xx -__ Identification number

4. Your Employer Identification Number (EIN), if any.	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	Number Street	Number Street
	City State ZIP Code	City State ZIP Code
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street P.O. Box	Number Street P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for bankruptcy	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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First Name Middle Name Last Name

Case number	(if known)	
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Part 2:

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file under	for Banki	ck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13						
8.	How you will pay the fee	local yours subn with I nee Appl I req By la less pay t	rill pay the entire fee when I file my petition. Please check with the clerk's office in your cal court for more details about how you may pay. Typically, if you are paying the fee curself, you may pay with cash, cashier's check, or money order. If your attorney is bmitting your payment on your behalf, your attorney may pay with a credit card or check that a pre-printed address. The properties of the fee in installments. If you choose this option, sign and attach the polication for Individuals to Pay The Filing Fee in Installments (Official Form 103A). The properties of the waived (You may request this option only if you are filing for Chapter 7. If you are judge may, but is not required to, waive your fee, and may do so only if your income is set than 150% of the official poverty line that applies to your family size and you are unable to you the fee in installments). If you choose this option, you must fill out the Application to Have the papter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.						
9.	Have you filed for bankruptcy within the last 8 years?	☐ No☐ Yes.	District		_ When	MM / DD / YYYY	Case number Case number Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ No☐ Yes.	District Debtor		_ When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known		
11.	Do you rent your residence?	☐ No.☐ Yes.	☐ No.☐ Yes	our landlord obtained an evict . Go to line 12.			? Against You (Form 101A) and file it as		

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First Name	Middle Name	Last Name	

Case number (i	if known)
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ZIP Code

Part 3:

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor \quad No. Go to Part 4 of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

I VO.	\circ	LO I	ait T.	

City

Yes. Name and location of business

Number	Street			

State

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?

> For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
- ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
- Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

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First Name Middle Name Last Name Case number (if known)_

Part	4: Report if You Own	or Have	Any Hazardous Prop	erty or Any	Property That	Needs Imm	ediate A	ttention	
14. 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? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	□ No □ Yes.	What is the hazard?							
		If immediate attention is	s needed, wh	y is it needed?					
		Where is the property?	Number	Street					
				City			State	ZIP Code	

First Name Middle Name Last Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required t	to	receive	а	briefing	about
credit counseling	be	ecause o	of:		

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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First Name Middle Name Last Name

Case number (if known)

Pa	irt 6: Ar	Answer These Questions for Reporting Purposes						
16.	What kin	d of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			□ No. Go to line 16b.□ Yes. Go to line 17.					
			16b. Are your debts primarily b money for a business or investr					
			□ No. Go to line 16c.□ Yes. Go to line 17.					
			16c. State the type of debts you owe	that are not consumer deb	ots or business	debts.		
17.	Are you	filing under 7?	□ No. I am not filing under Chapter 7. Go to line 18.					
	any exent excluded administ are paid available	estimate that after inpt property is I and rative expenses that funds will be for distribution ured creditors?	administrative expenses are paid that funds will be available to distribute to unsecured creditors? No			operty is excluded and ute to unsecured creditors?		
18.		ny creditors do mate that you	☐ 1-49 ☐ 50-99 ☐ 100-199	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000		□ 25,001-50,000 □ 50,001-100,000 □ More than 100,000		
			200-999	10,001-25,000		iniore triair 100,000		
19.		ch do you your assets to ?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 mil	on	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	estimate to be?	ch do you your liabilities gn Below	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pā	114 SI	gn below	I have examined this petition, and I c	dealare under penalty of pe	rium, that the in	formation provided in true and		
Fo	r you		correct.	deciare under penalty of pe	ijury triat trie iri	normation provided is true and		
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
			I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
			*	×				
			Signature of Debtor 1		Signature of D	ebtor 2		
			Executed on Executed on		MM / DD /YYYY			

Debtor 1				Case number (if known)
	Circl Name -	Middle Nesses	Lest Nesses	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email addre	ess

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?							
☐ No ☐ Yes							
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?							
☐ No ☐ Yes	_						
Did you pay or agree to pay someone who is not an atte	corney to help you fill out your bankruptcy forms	?					
Yes. Name of Person	claration, and Signature (Official Form 119).						
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware t attorney may cause me to lose my rights or property if I	that filing a bankruptcy case without an						
c &	C						
Signature of Debtor 1	Signature of Debtor 2						
Date MM / DD / YYYY	Date MM / DD / YYYY						
Contact phone	Contact phone						
Cell phone	Cell phone	_					
Email address	Email address						

SAMPLE MAILING MATRIX

A mailing matrix is a list of names and addresses of creditors and parties in interest. The names and addresses are added to the case data and are used for notices. Do not include account numbers or dollar amounts in the addresses. Type (or print) addresses in the following format on a clean sheet of paper. Use additional paper if necessary.

BellSouth 85 Annex Atlanta, GA 30385

Macy's P.O. Box 4564 Carol Stream, IL 60197

HOME Federal Credit Union 4000 St. Claude Ave. New Orleans, LA 70117-5456

United States Bankruptcy Court Eastern District of Louisiana

In re		Case No.
	Debtor(s)	Chapter
	VERIFICAT	TION OF CREDITOR MATRIX
Γhe above-named Debtors her	eby verify that the atta	sched list of creditors is true and correct to the best of their knowledge.
Date:		Signature of Debtor 1
Date:		Signature of Debtor 2

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Tell the Court	About Yourself and Your spouse if Your Spouse i	s Filing With You
	For Debtor 1:	For Debtor 2 (Only If Spouse Is Filing):
1. Your name		
	First name	First name
	Middle name	Middle name
	Last name	Last name
Part 2: Tell the Court	About all of Your Social Security or Federal Indiv	ridual Taxpayer Identification Numbers
2. All Social Security Numbers you have used		
	☐ You do not have a Social Security number.	─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─☐ You do not have a Social Security number.
All federal Individual Taxpayer	9	9
Identification Numbers (ITIN) you have used	9	9
Part 3: Sign Below	☐ You do not have an ITIN.	☐ You do not have an ITIN.
	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.
	*	x
	Signature of Debtor 1	Signature of Debtor 2
	Date MM / DD / YYYY	Date MM / DD / YYYY

Fill in this information to identify your case:		
Debtor 1		
First Name Middle Name Debtor 2	Last Name	
(Spouse, if filing) First Name Middle Name	Last Name	_
United States Bankruptcy Court for the:	District of(State)	_
Case number(If known)		
(ii Miomi)		☐ Check if this is an
		amended filing
Official Form 103A		
Application for Individua	Is to Pay the I	Filing Fee in Installments 12/15
information.	narried people are filing tog	ether, both are equally responsible for supplying correct
Part 1: Specify Your Proposed Paymen	t Timetable	
Which chapter of the Bankruptcy Code	☐ Chapter 7	
are you choosing to file under?	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	
	·	
You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to	You propose to pay	
pay them. Be sure all dates are business		☐ With the filing of the
days. Then add the payments you propose to pay.	\$	petition
You must propose to pay the entire fee no		On or before this date MM / DD / YYYY
later than 120 days after you file this bankruptcy case. If the court approves your	\$	On or before this date
application, the court will set your final		MM / DD / YYYY
payment timetable.	\$	On or before this date
	+ \$	On or before this date
	ν φ	MM / DD / YYYY
Total	\$	■ Your total must equal the entire fee for the chapter you checked in line 1
Part 2: Sign Below		
By signing here, you state that you are unable to	to pay the full filing fee at o	nce, that you want to pay the fee in installments, and that you
understand that:	o pay and ram ming roo at o	,,,,
You must pay your entire filing fee before you preparer, or anyone else for services in conne		transfer any more property to an attorney, bankruptcy petition ase.
		nkruptcy, unless the court later extends your deadline. Your
debts will not be discharged until your entire for		,,
If you do not make any payment when it is du may be affected.	e, your bankruptcy case may	be dismissed, and your rights in other bankruptcy proceedings
×		*
	Signature of Debtor 2	Your attorney's name and signature, if you used one
Date D	Date	Date
MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
		20

F	Fill in this information to identify you	ur case:				
	Debtor 1					
	First Name Debtor 2	Middle Name La	ast Name			
	(Spouse, if filing) First Name	Middle Name La	ast Name			
L	United States Bankruptcy Court for the:	District of				
	Case number(If known)					Check if this is an amended filing
	Official Form 103B Application to Ha	ave the Ch	apter 7 Filing	a Fee Wa	aived	12/15
Be inf (if	e as complete and accurate as possiformation. If more space is needed, known).	ible. If two married peopl	le are filing together, both ar to this form. On the top of a	e equally responsi	ble for supplying	correct
1.	What is the size of your family? Your family includes you, your spouse, and any dependents listed on Schedule J: Your Expenses (Official Form 106J).	Check all that apply: You Your spouse Your dependents			of people	
2.	Fill in your family's average monthly income.				That person monthly ne (take-home	t income
	Include your spouse's income if your spouse is living with you, even if your spouse is not filing. Do not include your spouse's income if you are separated and	value (if known) of any i that you receive, such a	our spouse's income. Include the non-cash governmental assistan as food stamps (benefits under th Assistance Program) or housing	ce Vou	•	
	your spouse is not filing with you.		d out <i>Schedule I: Your Income</i> , s	ee Your spouse	9 + _{\$}	
				Subtotal	\$	
		Subtract any non-cash gincluded above.	governmental assistance that yo	u	- \$	
		Your family's averag	e monthly net income	Total	\$	
3.	Do you receive non-cash	No	Type of assistance			
	governmental assistance?	Yes. Describe				
4.	Do you expect your family's average monthly net income to increase or decrease by more than 10% during the next 6 months?	No Yes. Explain				
5.	Tell the court why you are unable to installments within 120 days. If you circumstances that cause you to not fee in installments, explain them.	u have some additional				

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First Name Middle Name Last Name Case number (if known)

Part 2:	Tell the Court About Your Monthly Expenses	

6.	Include amounts paid by any government assistance that you reported on line 2. Stimate your average monthly expenses. \$								
	If you have already filled out <i>Schedule</i> line 22 from that form.	J, Your E.	xpenses, copy						
7.	Do these expenses cover anyone who is not included in your family as reported in line 1?	No Yes	. Identify who						
8.	Does anyone other than you regularly pay any of these expenses? If you have already filled out Schedule I: Your Income, copy the total from line 11.	No Yes	. How much do y	you regu	ılarly receive	as contributions	?? \$ mont	ihly	
9.	Do you expect your average monthly expenses to increase or decrease by more than 10% during the next 6 months?	No Yes	. Explain						
Pa	Tell the Court About Yo	our Prop	erty						
lf	you have already filled out Schedule	A/B: Pro	perty (Official F	orm 10	6A/B) attach	n copies to this	application and go	to Part 4.	
10.	How much cash do you have?								
	Examples: Money you have in your wallet, in your home, and on hand when you file this application	Cash:		\$		_			
11.	Bank accounts and other deposits of money?			Institu	tion name:			Amount:	
	Examples: Checking, savings, money market, or other financial	Checking	account:					\$	-
	accounts; certificates of deposit;	Savings a	account:					\$	-
	shares in banks, credit unions, brokerage houses, and other	Other fina	ancial accounts:					\$	_
	similar institutions. If you have more than one account with the	Other fine	ancial accounts:					\$	
	same institution, list each. Do not include 401(k) and IRA accounts.	Other illia	inciai accounts.					·	•
12.	Your home? (if you own it outright or								
	are purchasing it)	Number	Street				Current value:	\$	
	Examples: House, condominium, manufactured home, or mobile home	City			State	ZIP Code	Amount you owe on mortgage and liens:	\$	
13.	Other real estate?							0	
		Number	Street				Current value: Amount you owe	\$	
		City			State	ZIP Code	on mortgage and liens:	\$	
14.	The vehicles you own?	Make							
	Examples: Cars, vans, trucks,	Make: Model:					Current value:	\$	
	sports utility vehicles, motorcycles,	Year:			-		Amount you owe		
	tractors, boats	Mileage			-		on liens:	\$	
		Make:							
		Model:			-		Current value:	\$	
		Year:					Amount you owe	¢	
		Mileage			-		on liens:	\$	

	First Name	Middle Name	Last Nan	ne					
15. Other as	sets?		Describe	e the other assets:		C	urrent va	ılue:	\$
Do not in and cloth	clude househ ing.	old items					Amount yon liens:	ou owe	\$
Examples or lump s support, o maintena settlemen benefits,	s: Tax refunds sum alimony, s child support, ince, divorce onts, Social Ser workers' com injury recover	s, past due spousal or property curity pensation,	Who owe	es you the money or property?	\$	much is			elieve you will likely receive in the next 180 days? Explain:
Part 4:	Answer Ti	nese Addition	nal Quest	tions					
service: filling o		e, including	No Yes.	Whom did you pay? Check all that a An attorney A bankruptcy petition preparer, pa Someone else	aralegal,				How much did you pay?
you exp	ou promised pect to pay so s for your ba	omeone for	No Yes.	Mhom do you expect to pay? Chec An attorney A bankruptcy petition preparer, pa Someone else	aralegal,	or typing s			How much do you expect to pay?
	yone paid son shalf for servi		No Yes.	Who was paid on your behalf? Check all that apply: An attorney A bankruptcy petition preparer, paralegal, or typing service Someone else	Che	o paid? eck all that Parent Brother or Friend Pastor or of Someone	sister		How much did someone else pay? \$
	ou filed for ba he last 8 yea		No Yes.	District					
Part 5:	Sign Belov	w		District					
	_		-	lare that I cannot afford to pay the fi on is true and correct.	iling fee	either in f	full or in	ı installme	ents. I also declare
Date	re of Debtor 1			Signature of Debtor 2 Date					

Case number (if known)_

Debtor 1

UNITED STATES BANKRUPTCY COURT REQUIRED LISTS, SCHEDULES, STATEMENTS, AND FEES Voluntary Chapter 7 Case

file a sign	Filing Fee of \$245. If the fee is to be paid in installments or the debtor requests a waiver of the fee, the debtor must be an individual and must ed application for court approval. Official Form 103A or 103B and Fed.R.Bankr.P. 1006(b), (c).
□ payable in	Administrative fee of \$78 and trustee surcharge of \$15. If the debtor is an individual and the court grants the debtor's request, these fees are installments or may be waived.
□ Bankrupt	Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101) or Voluntary Petition for Non-Individuals Filing for cy (Official Form 201); Names and addresses of all creditors of the debtor. Must be filed WITH the petition. Fed.R.Bankr.P. 1007(a)(1).
notice has	Notice to Individual Debtor with Primarily Consumer Debts under 11 U.S.C. § 342(b) (Director's Form 2010), if applicable. Required if is an individual with primarily consumer debts. The notice must be GIVEN to the debtor before the petition is filed. Certification that the been given must be FILED with the petition or within 15 days. 11 U.S.C. §§ 342(b), 521(a)(1)(B)(iii), 707(a)(3). Official Form 101 contains the certification.
prepares tl	Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Required if a "bankruptcy petition preparer" ne petition. Must be submitted WITH the petition. 11 U.S.C. § 110(b)(2).
petition. I	Statement About Your Social Security Numbers (Official Form 121). Required if the debtor is an individual. Must be submitted WITH the Fed.R.Bankr.P. 1007(f).
	Credit Counseling Requirement (Official Form 101); Certificate of Credit Counseling and Debt Repayment Plan, if applicable; Section certification or § 109(h)(4) request, if applicable. If applicable, the Certificate of Credit Counseling and Debt Repayment Plan must be filed etition or within 14 days. If applicable, the § 109(h)(3) certification or the § 109(h)(4) request must be filed WITH the petition. Fed.R.Bankr.P. (c).
□ "bankrupt	Statement disclosing compensation paid or to be paid to a "bankruptcy petition preparer" (Director's Form 2800). Required if a cy petition preparer" prepares the petition. Must be submitted WITH the petition. 11 U.S.C. §110(h)(2).
or within	Statement of Your Current Monthly Income (Official Form 122A). Required if the debtor is an individual. Must be filed with the petition 14 days. Fed.R.Bankr.P. 1007(b), (c).
	Schedules of assets and liabilities (Official Forms 106 or 206). Must be filed with the petition or within 14 days. Fed.R.Bankr.P. 1007(b),(c).
□ 14 days. I	Schedule of Executory Contracts and Unexpired Leases (Schedule G of Official Form 106 or 206). Must be filed with the petition or within Fed.R.Bankr.P. 1007(b), (c).
☐ Official Fo	Schedules of Your Income and Your Expenses (Schedules I and J of Official Form 106). If the debtor is an individual, Schedules I and J of orm 106 must be filed with the petition or within 14 days. 11 U.S.C. § 521(1) and Fed.R.Bankr.P. 1007(b), (c).
	Statement of financial affairs (Official Form 107 or 207). Must be filed with the petition or within 14 days. Fed.R.Bankr.P. 1007(b), (c).
the petitio	Copies of all payment advices or other evidence of payment received by the debtor from any employer within 60 days before the filing of n. Required if the debtor is an individual. Must be filed with the petition or within 14 days. Fed.R.Bankr.P. 1007(b), (c).
	Statement of Intention for Individuals Filing Under Chapter 7 (Official Form 108). Required ONLY if the debtor is an individual and the of assets and liabilities contain debts secured by property of the estate or personal property subject to an unexpired lease. Must be filed within by the date set for the Section 341 meeting of creditors, whichever is earlier. 11 U.S.C. §§ 362(h) and 521(a)(2).
represente	Statement disclosing compensation paid or to be paid to the attorney for the debtor (Director's Form 2030). Required if the debtor is d by an attorney. Must be filed within 14 days or any other date set by the court. 11 U.S.C. § 329 and Fed.R.Bankr.P. 2016(b).
	Certification About a Financial Management Course. Required if the debtor is an individual, unless the course provider has notified the the debtor has completed the course, or the debtor is exempt under § 727(a)(11). Must be filed within 60 days of the first date set for the fereditors. 11 U.S.C. § 727(a)(11) and Fed.R.Bankr.P. 1007(b)(7), (c).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$78	administrative fee
+	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:	
Debtor 1	
First Name Middle Name Last Name Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	_
Case number (If known)	Check if this is an amended filing
	amonada ming
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	rmation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for sinformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	\$
1a. Copy line 55, Total real estate, from Schedule A/B	Ψ
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	\$
	Ψ
Part 2: Summarize Your Liabilities	
	Your liabilities
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$
Part 3: Summarize Your Income and Expenses	
Cammanze rour moome and Expenses	
4. Schedule I: Your Income (Official Form 106I)	Φ.
Copy your combined monthly income from line 12 of Schedule I	Φ
5. Schedule J: Your Expenses (Official Form 106J)	r.
Copy your monthly expenses from line 22c of Schedule J	\$

\square	htor	1

First Name Middle Name Last Name

Case number (if known)					

Part 4:	Answer These	Questions for	Administrative	and Statistical Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?
	□ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules □ Yes

7. What kind of debt do you have?

□ Y	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal,
fa	amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official
	Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
9g. Total. Add lines 9a through 9f.	\$

Fill in this information to identify your case and this filing:							
Debtor 1							
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:		District of (State)				
Case number		(=====)					

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. 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. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

☐ No	ou own or have any legal or equitable interest o. Go to Part 2. es. Where is the property?	st in any residence, building, land, or similar prop	erty?	
1.1.	Street address, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair.	d claims on <i>Schedule D:</i>
	- Silver address, il avallable, di otilei description	☐ Condominium or cooperative☐ Manufactured or mobile home☐ Land	Current value of the entire property?	Current value of the portion you own?
	City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one. Debtor 1 only		·
	County	□ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Check if this is co	mmunity property
If you	own or have more than one, list here:	Other information you wish to add about this it property identification number:		
1.2.	Street address, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>
	Street address, if available, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
	City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
		Who has an interest in the property? Check one.		
		☐ Debtor 1 only ☐ Debtor 2 only		
	County	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Check if this is co	mmunity property
		☐ At least one of the debtors and another	(see instructions)	minumity property
		Other information you wish to add about this ite property identification number:	m, such as local	

What is the property? Chock all that apply. Single-family home Diagnost Address. If available, or other description Diagnost multi-unit building Condominium or cooperative Diagnost Address. If available, or other description Diagnost multi-unit building Condominium or cooperative Current value of the Curre entire property? Check one. Diagnost Address and another Diagnost Address Add		Case number (if known) First Name Middle Name Last Name					
Street address. If available, or other description				This Name whole Name Last Name			
County State ZIP Code Investment property S Describe the nature of your interest (such as fee simple, the entire property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 one. Describe Your Vehicles Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 one. Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 one. Debtor 3 only Debtor 4 one. Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 8 only Deb	s on Schedule D:	the amount of any secured cl	☐ Single-family home	Street address if available or other description			
Land S	ent value of the		☐ Condominium or cooperative	Street address, if available, or other description			
County County Co		\$\$	Land				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this is communi (see instructions) Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information you wish to add about this item, such as local property identification number: Other information years of the debtors and another of the debtors and another of the debtor information: Other information:	e, tenancy by	interest (such as fee sir	Timeshare	City State ZIP Code			
Debtor 2 only			Who has an interest in the property? Check one.				
Debtor 2 only Check if this is communi (see instructions) At least one of the debtors and another				County			
At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:	nity property	☐ Check if this is come		,			
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2:	mty property		_				
Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes 3.1. Make: Model: Year: Approximate mileage: Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: 3.2. Make: Model: Model: Do not deduct secured claims or extent the amount of any secured claims. Or extent the property? Who has an interest in the property (see instructions) If you own or have more than one, describe here: 3.2. Make: Model: Do not deduct secured claims or extent the property? Check one. Current value of the entire property? Do not deduct secured claims or extent the property? Check one. Do not deduct secured claims or extent the property? Do not deduct secured claims or extent the property? Current value of the entire property? Current value of the control of any secured claims. Or extent the amount of any secured claims. Or extent the property? Do not deduct secured claims or extent the property? Do not deduct secured claims or extent the property? Do not deduct secured claims or extent the property? Current value of the control of the entire property? Do not deduct secured claims or extent the property? Do not deduct secured claims or extent the property? Do not deduct secured claims or extent the property? Current value of the control of the entire property?							
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Model: Year: Approximate mileage: Other information: If you own or have more than one, describe here: 3.2. Make: Model: Year: Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Who has an interest in the property? Check one. Model: Year: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only		nd Unexpired Leases.		, vans, trucks, tractors, sport utility vehicles			
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Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: 3.2. Make: Who has an interest in the property? Check one.	rent value of the	Current value of the	•	Year:			
Check if this is community property (see instructions) S S	tion you own?		· · · · · · · · · · · · · · · · · · ·	Approximate mileage:			
If you own or have more than one, describe here: 3.2. Make: Model: Year: Who has an interest in the property? Check one. Do not deduct secured claims or exthe amount of any secured claims. Creditors Who Have Claims Secured. Current value of the curre entire property? Current value of the curre property?				Other information:			
Who has an interest in the property? Check one. Model: Year: Who has an interest in the property? Check one. Do not deduct secured claims or extend amount of any secured claims. Creditors Who Have Claims Secured Debtor 1 only Debtor 2 only Current value of the curre entire property?		\$ \$					
Model: Year: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only				u own or have more than one, describe here:			
Model: Year: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Current value of the Curre entire property? Portion							
Year: Current value of the Curre			_	Make:			
Debtor 1 and Debtor 2 only entire property? portion	rent value of the	the amount of any secured cl	Debtor 1 only				
Approximate mileage:	tion you own?	the amount of any secured cl Creditors Who Have Claims	Debtor 1 only Debtor 2 only	Model:			
Other information:		the amount of any secured of Creditors Who Have Claims Current value of the	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Model:			
Check if this is community property (see instructions)		the amount of any secured of Creditors Who Have Claims Current value of the	Debtor 1 only Debtor 2 only	Model: Year: Approximate mileage:			

ebtor 1	First Name	Middle Name	Last Name	Case number (# ki	nown)	
3.3.	Make: Model:			Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
	Year: Approximate mile	age:		□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information			☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make: Model:			Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	Year: Approximate miles			□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information			☐ Check if this is community property (see instructions)	\$	\$
	<i>nples:</i> Boats, trailer o			r recreational vehicles, other vehicles, and acces t, fishing vessels, snowmobiles, motorcycle accesso		
4.1.				Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Other information	:		At least one of the debtors and another Check if this is community property (see	Current value of the entire property?	portion you own?
If you	own or have more	than one, list he		instructions)	\$	\$
				Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	Year:Other information:	<u> </u>		Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?

page 3

Schedule A/B: Property

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Official Form 106A/B

☐ Check if this is community property (see instructions)

Eirot Nome	Middle Nome	Lost Nama	

Part 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	Yes. Describe	\$
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No	7
	Yes. Describe	\$
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	□ No	
	Yes. Describe	\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No	7
	Yes. Describe	\$
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	□ No	
	Yes. Describe	\$
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
	Yes. Describe	\$
		Φ
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	□ No □ Yes. Describe	\$
10	Non-farm animals	1
13.	Examples: Dogs, cats, birds, horses	
	□ No	
	Yes. Describe	\$
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	□ No	
	☐ Yes. Give specific	\$
	information	Ψ
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$

മ	htor	-1

Case number (if known)

Part 4: Describe Your Financial Assets

Do y	ou own or have any l	egal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		ave in your wallet, in your hon	ne, in a safe deposit box, and on hand when you f	ile your petition	
] Yes			Cash:	\$
E.	and other sir		unts; certificates of deposit; shares in credit unions nultiple accounts with the same institution, list each		
	No Yes		Institution name:		
		17.1. Checking account:			\$
		17.2. Checking account:			\$
		17.3. Savings account:			\$
		17.4. Savings account:		· · · · · · · · · · · · · · · · · · ·	\$
		17.5. Certificates of deposit:		 	\$
		17.6. Other financial account:		· · · · · · · · · · · · · · · · · · ·	\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
E		or publicly traded stocks nvestment accounts with brok	erage firms, money market accounts		
	Yes	Institution or issuer name:			
					\$
					\$
	on-publicly traded st n LLC, partnership, a		orated and unincorporated businesses, including	ng an interest in	
	No	Name of entity:		% of ownership:	
_	Yes. Give specific information about				\$
	them				\$
				%	\$

ebtor 1 First Name	Middle Name	Last Name	Case number (if known)	
	-			
		other negotiable and non-ne	egotiable instruments hissory notes, and money orders.	
Non-negotiable instrum	nents are those you	cannot transfer to someone b	by signing or delivering them.	
□ No				
Yes. Give specific	Issuer name:			
information about them				\$
				\$
				\$
Retirement or pension		401(k) 403(h) thrift sovings	accounts, or other pension or profit-sharing plans	
Examples. Interests in □ No	ina, Enioa, Reogn	, +01(N), 403(D), HIIIIL SAVINGS	accounts, or other pension or pront-sharing plans	
Yes. List each				
account separately	Type of account:	Institution name:		
	401(k) or similar pla	an:		\$
	Pension plan:			\$
	IRA:			\$
	Retirement account	:		\$
	Keogh:			\$
	Additional account:			\$
	Additional account:			\$
	Additional account.			\$
Security deposits and		a made so that you may conti	nue service or use from a company	
Examples: Agreements			tric, gas, water), telecommunications	
companies, or others				
□ No				
Yes		Institution name or individual:		
	Electric:			\$
	Gas:			\$
	Heating oil:			\$
	Security deposit on	rental unit:		\$
	Prepaid rent:			\$
	Telephone:			\$
	Water:			\$
	Rented furniture:			\$

Other:

☐ Yes..... Issuer name and description:

☐ No

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

Debtor 1				Case number	(if known)	
Dobtor 1	First Name	Middle Name	Last Name		ii kilowiij	
24. Interests	in an educatio	n IRA, in an acco	ount in a qua	lified ABLE program, or under a qualified st	ate tuition program.	
26 U.S.C.	§§ 530(b)(1), 5	529A(b), and 529(b)(1).			
☐ No						
☐ Yes		······ Institution r	name and des	cription. Separately file the records of any inter-	ests.11 U.S.C. § 521(c)	
						\$
						\$
						\$
	quitable or futu ble for your bei		roperty (othe	er than anything listed in line 1), and rights o	r powers	
☐ No						
Yes. 0	Give specific					
inform	ation about the	m				\$
				other intellectual property from royalties and licensing agreements		
□ No	. Internet dema	iii iiaiiico, weboik	oo, proocedo i	non royalico and hoorong agreements		
	Sive specific					
	ation about the	m				\$
		nd other general				
Examples	: Building permi	its, exclusive licer	nses, coopera	tive association holdings, liquor licenses, profes	ssional licenses	
☐ No						
	Give specific					
inform	ation about the	m				\$
Manarian		2				
woney or pro	operty owed to	you r				Current value of the portion you own?
						Do not deduct secured claims or exemptions.
						dains of exemptions.
	ds owed to you	u				
☐ No	Nice of the last					
	Give specific info bout them, inclu				Federal: \$	<u> </u>
У	ou already filed	the returns			State: \$	
а	ind the tax years	S			Local: \$	<u> </u>
			<u> </u>			
29. Family su	ipport					
Examples	: Past due or lu	mp sum alimony,	spousal supp	ort, child support, maintenance, divorce settlen	nent, property settlemen	t
☐ No						
Yes. 0	Sive specific info	ormation				
					Alimony:	\$
					Maintenance:	\$
					Support:	\$
					Divorce settlement:	\$
					Property settlement:	\$
	ounts someon					
Examples	: Unpaid wages	s, disability insura	nce payments	s, disability benefits, sick pay, vacation pay, wo ade to someone else	rkers' compensation,	
☐ No	Josiai Occulii	., Dononio, unpaid	a iodilo you illi	ado to componio disc		
	Give specific info	ormation				

D	ebtor 1				C	case number (if known)	
		First Name	Middle Name	Last Name			
31.		n insurance Health, disa		ce; health savings ac	count (HSA); credit, homeov	wner's, or renter's insurance	
	☐ No☐ Yes. N	ame the ins	urance company	Company name:		Beneficiary:	Surrender or refund value:
			and list its value	Company name.		Deficially.	Sufferider of Telund Value.
							\$
							\$
							\$
32.	If you are t	he beneficia	-	from someone who xpect proceeds from		e currently entitled to receive	
	☐ Yes. G	ive specific	information				
							\$
33.	Examples:	Accidents,	employment dispute	not you have filed a s, insurance claims, o	a lawsuit or made a deman or rights to sue	nd for payment	
	■ Yes. D	escribe eac	h claim				\$
34.	to set off o	claims	-	s of every nature, in	ncluding counterclaims of	the debtor and rights	
	Yes. D	escribe eac	h claim				\$
35.	☐ No		you did not already	list			\$
36.			-		ding any entries for pages		\$
	101 1 411 4.	wine that	namber nere				
Pa	art 5: D	escribe	Any Business-I	Related Propert	y You Own or Have a	an Interest In. List any r	eal estate in Part 1.
37.	Do you ow	n or have a	any legal or equitab	le interest in any bu	usiness-related property?		
	No. Go						
	☐ Yes. G	to to line 38.					
							Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts No	receivable	or commissions yo	u already earned			_
	☐ Yes. D	escribe					\$
30	Office equ	linment fu	nishings, and supp	olies			
აყ.	Examples: B	Business-relat			iers, fax machines, rugs, telepho	ones, desks, chairs, electronic devices	;
	☐ Yes. D	escribe					\$
							1

De	hte	٦r	1

 A 41 1 11 A 1	1 (1)	

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade							
☐ No							
Yes. Describe			\$				
			Φ				
41. Inventory							
□ No							
☐ Yes. Describe			\$				
			4				
42. Interests in partnershi	ps or joint ventures						
☐ No							
☐ Yes. Describe	Name of entity:	% of ownership:					
		•	•				
			\$				
		%	\$				
		%	\$				
42 Customor lists mailin	g lists, or other compilations						
No	g lists, or other compliations						
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?					
□ No		,-					
Yes. Desc	riha		1				
Tes. Desc	noe		\$				
	property you did not already list						
☐ No							
☐ Yes. Give specific			\$				
information							
			\$				
			\$				
			\$				
			\$				
			*				
			\$				
45. Add the dollar value of	f all of your entries from Part 5, including any entries for pages you have att	ached	\$				
for Part 5. Write that r	umber here		Φ				
Part 6: Describe A	ny Farm- and Commercial Fishing-Related Property You Own or Ha	ve an Interest In					
If you own or	have an interest in farmland, list it in Part 1.						
46. Do you own or have a	ny legal or equitable interest in any farm- or commercial fishing-related prop	erty?					
No. Go to Part 7.							
☐ Yes. Go to line 47.							
			Current value of the				
			portion you own?				
			Do not deduct secured claims or exemptions.				
47. Farm animals							
Examples: Livestock, p	oultry, farm-raised fish						
☐ No							
☐ Yes							
			Φ.				
			\$				

Debtor 1	First Name	Middle Name	Last Name		Case number (if known)	
° Crons—oit	hor growing	or harvested				
No No	ner growing	ornarvesteu				
Yes. Gi	ve specific					
	tion					\$
9. Farm and f	ishing equi	oment, impleme	nts, machinery, fixtu	ires, and tools of trade		
Yes						
						\$
0. Farm and f	ishing supp	lies, chemicals,	and feed			
☐ No	_					
Yes						
						\$
-	and comme	rcial fishing-rela	ted property you di	d not already list		
☐ No☐ Yes. Gi						
	tion					\$
		-		uding any entries for pag	ges you nave attached	\$
Part 7: D	escribe A	الا ۱۱ Property ۱	ou Own or Hav	e an Interest in Th	at You Did Not List Abov	e
-		perty of any kin country club membe	d you did not alread ership	ly list?		
☐ No						¢
Yes. Gi	ve specific					Ψ \$
						Ψ \$
	L					Ψ
4. Add the do	ollar value of	all of your entr	ies from Part 7. Writ	e that number here		\$
Part 8: Li	ist the To	tals of Each	Part of this Fo	rm		
5. Part 1: Tot a	al real estate	e, line 2				\$
6. Part 2: Tot a	al vehicles,	line 5		\$		
7. Part 3: Tota	al personal	and household i	tems, line 15	\$		
8. Part 4: Tot a	al financial a	assets, line 36		\$	_	
9. Part 5: Tot a	al business-	related property	, line 45	\$		

Debtor 1 First Name Middle Name Last Name			
Debtor 1			
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: District o	f
Case number (If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Current value of the Schedule A/B that lists this property portion you own Check only one box for each exemption. Copy the value from Schedule A/B Brief description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$** description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: □ \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$214,000? (Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.) ☐ No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Nο Yes

Last Name

Case number (if known)_____

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$	\$ 100% of fair market value, up to		
Line from Schedule A/B: ———		any applicable statutory limit		
Brief description:	\$	\(\sigma\)		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$			
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$	\$ \$ 100% of fair market value, up to		
Line from Schedule A/B: ———		any applicable statutory limit		
Brief description:	\$	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$			
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$	\$ \$ 100% of fair market value, up to		
Line from Schedule A/B: ———		any applicable statutory limit		
Brief description:	\$	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$			
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	\$	- \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit		

Fill in this information to identify your case:										
Debtor 1										
First Name Middle N Debtor 2	ame Last Name									
(Spouse, if filing) First Name Middle N	ame Last Name									
United States Bankruptcy Court for the:	District of(State)									
Case number	(Otato)		Ohaak:	£ 4h:- :						
(If known)			☐ Check i amende							
				3						
Official Form 106D										
Schedule D: Creditors	s Who Have Claims Sec	ured by Pro	perty	12/15						
	If two married people are filing together, both the Additional Page, fill it out, number the en									
additional pages, write your name and cas										
Do any creditors have claims secured b	v vour property?									
	n to the court with your other schedules. You have	nothing else to report on	this form.							
Yes. Fill in all of the information below.	•									
Part 1: List All Secured Claims										
2. List all secured claims. If a creditor has m	nore than one secured claim, list the creditor sepa	Column A Tately Amount of claim	Column B Value of collateral	Column C Unsecured						
	as a particular claim, list the other creditors in Par abetical order according to the creditor's name.	2. Do not deduct the	that supports this	portion						
	abelical order according to the creditor's name.	value of collateral.	claim	If any						
	Describe the property that secures the claim:	\$	\$	\$						
Creditor's Name										
Number Street										
	As of the date you file, the claim is: Check all that	apply.								
	☐ Contingent ☐ Unliquidated									
City State ZIP Code	☐ Disputed									
Who owes the debt? Check one.	Nature of lien. Check all that apply.									
Debtor 1 only	☐ An agreement you made (such as mortgage or see	cured								
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)									
At least one of the debtors and another	☐ Judgment lien from a lawsuit									
☐ Check if this claim relates to a	Other (including a right to offset)									
community debt										
Date debt was incurred	Last 4 digits of account number									
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$						
Creditor's Name										
Number Street										
	As of the date you file, the claim is: Check all that Contingent	apply.								
	☐ Unliquidated									
City State ZIP Code	☐ Disputed									
Who owes the debt? Check one.	Nature of lien. Check all that apply.									
Debtor 1 only	An agreement you made (such as mortgage or second loop)	cured								
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)									
At least one of the debtors and another	☐ Judgment lien from a lawsuit									
☐ Check if this claim relates to a	Other (including a right to offset)									
community debt										
Date debt was incurred Last 4 digits of account number										
Add the dollar value of your entries in (e: \$	_								

\Box	htor	4	

First Name	Middle Name	Last Nama	

Case number	(if known)					

Part 1:	Additional Page	Column A Amount of claim	Column B Value of collateral	Column C Unsecured	
rait i.	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			that supports this claim	portion If any
Creditor	r's Name	Describe the property that secures the claim:	\$	\$	\$
Number	Street				
		As of the date you file, the claim is: Check all that apply.			
City	State ZIP Code	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
_	ves the debt? Check one.	Nature of lien. Check all that apply.			
	tor 1 only tor 2 only	An agreement you made (such as mortgage or secured car loan)			
	tor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At le	ast one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)☐			
	ck if this claim relates to a munity debt	Care (including a right to onset)			
Date de	bt was incurred	Last 4 digits of account number			
		Describe the property that secures the claim:	\$	\$	\$
Creditor	r's Name				
Number	Street				
		As of the date you file, the claim is: Check all that apply. Contingent			
		☐ Unliquidated			
City	State ZIP Code	☐ Disputed			
	ves the debt? Check one. tor 1 only	Nature of lien. Check all that apply.			
	tor 2 only	An agreement you made (such as mortgage or secured car loan)			
_	tor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	ast one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
	ck if this claim relates to a nmunity debt				
Date de	bt was incurred	Last 4 digits of account number			
	. N	Describe the property that secures the claim:	\$	\$	\$
Creditor	r's Name				
Number	Street				
		As of the date you file, the claim is: Check all that apply.	ı		
Oit	Otata 7/D Orde	Contingent			
City	State ZIP Code	☐ Unliquidated ☐ Disputed			
_	ves the debt? Check one.	Nature of lien. Check all that apply.			
	tor 1 only tor 2 only	An agreement you made (such as mortgage or secured car loan)			
☐ Debt	tor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	ast one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
	ck if this claim relates to a nmunity debt				
Date de	bt was incurred	Last 4 digits of account number			
A	Add the dollar value of your entries	in Column A on this page. Write that number here:	\$		
	this is the last page of your form, Vrite that number here:	add the dollar value totals from all pages.	\$		

Debtor 1				Case number (if known)
	First Name	Middle Name	Last Name	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	•			
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
 Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
 Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
,				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
Oity		Gidle	Zii Ooue	

Fil	I in this information to identify yo	ur case:					
	· · · · · · · · · · · · · · · · · · ·	001					
De	btor 1 First Name	Middle Name	Last Name				
	btor 2						
(Sp	ouse, if filing) First Name	Middle Name	Last Name				
Un	ited States Bankruptcy Court for the:		District of (State)			Па	
	se number						k if this is an ided filing
(IT	known)					anioi	idod iiiiig
Of	ficial Form 106E/F						
		!:4 o o . VA	lha Hawa IImaaa	ad Claim			
20	hedule E/F: Cred	litors w	no Have Unsec	ured Clain	ns		12/15
List A/B: cred need any	the other party to any executory to expect the other party to any executory to expect the party (Official Form 106A/B) alitors with partially secured claim ded, copy the Part you need, fill it additional pages, write your name to the List All of Your PRIORI	contracts or u and on Sched s that are liste out, number e and case nu	nexpired leases that could resi ule G: Executory Contracts and ed in Schedule D: Creditors Wh the entries in the boxes on the mber (if known).	ult in a claim. Also li d Unexpired Leases (o Hold Claims Secur	st executory co Official Form 1 ed by Property	ontracts on So 06G). Do not i . If more spac	chedule nclude any e is
	Do any creditors have priority uns No. Go to Part 2.	secured claims	s against you?				
	Yes.						
2.L	ist all of your priority unsecured						
	each claim listed, identify what type nonpriority amounts. As much as po						
	unsecured claims, fill out the Continu						
(For an explanation of each type of	claim, see the i	nstructions for this form in the ins	truction booklet.)		-	
					Total claim	Priority amount	Nonpriority amount
2.1					¢.	¢.	¢.
Ш	Priority Creditor's Name		Last 4 digits of account number	er	Φ	Φ	Φ
			When was the debt incurred?				
	Number Street		As of the data you file the alsi	m io. Chaale all that anni			
			As of the date you file, the clai Contingent	m is: Check all that apply	/.		
	City State	ZIP Code	Unliquidated				
	Who incurred the debt? Check one.		Disputed				
	☐ Debtor 1 only ☐ Debtor 2 only		Type of PRIORITY unsecured	d claim:			
	Debtor 1 and Debtor 2 only		Domestic support obligations	a Ciaiiii.			
	☐ At least one of the debtors and ano	ther	Taxes and certain other debts	you owe the government			
	☐ Check if this claim is for a com	munity debt	☐ Claims for death or personal in				
	Is the claim subject to offset?		intoxicated				
	□ No □ Yes		Other. Specify		_		
2.2	Yes						
2.2	Priority Creditor's Name		Last 4 digits of account number	er	\$	\$	\$
	N		When was the debt incurred?				
	Number Street		As of the date you file, the clai	m is: Check all that apply	/ .		
			Contingent				
	City State	ZIP Code	Unliquidated				
	Who incurred the debt? Check one.		Disputed				
	Debtor 1 only		Type of PRIORITY unsecured	d claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only		☐ Domestic support obligations				
	At least one of the debtors and and	thor	☐ Taxes and certain other debts	you owe the government			

☐ No Yes

At least one of the debtors and another

Is the claim subject to offset?

lacksquare Check if this claim is for a community debt

intoxicated

Other. Specify

lacksquare Claims for death or personal injury while you were

_				
\cap	⊃h	ıtο	r	1

First Name Middle Name Last Name

Case number (if known)_____

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
	Debtor 1 only Debtor 2 only	Domestic support obligations			
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No				
	☐ Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.	•			
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
	At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply. Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligationsTaxes and certain other debts you owe the government			
	☐ At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				

\square	htor	1

Part 2: List All of Your NONPRIORITY Unsecured Claims

			Case number (if known)
Eiret Name	Middle Name	Last Name	

3.	Do any creditors have nonpriority unsecured claims against you ☐ No. You have nothing to report in this part. Submit this form to th ☐ Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical priority unsecured claim, list the creditor separately for each claim. For included in Part 1. If more than one creditor holds a particular claim, fill out the Continuation Page of Part 2.	or each claim listed, identify what type of claim it is. Do not list	claims already
			Total claim
4.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street	when was the dest incurred:	
	. a.m.b.		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated☐ Disputed	
	Debtor 2 only	_ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ No☐ Yes	Other. Specify	
	ss		
4.2		Last 4 digits of account number When was the debt incurred?	\$
	Nonpriority Creditor's Name	when was the debt incurred?	
	Number Street	As of the data you file the claim in Check all that analy	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	T. CHONDRIODITY	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☐ No☐ Yes	a other. opeony	
4.3			
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
		When was the debt incurred?	
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	☐ Debtor 1 only	☐ Unliquidated☐ Disputed	
	Debtor 2 only	_ Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Debtor 1

First Name Middle Name Last Name

Case number (if known)	
------------------------	--

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one. ☐ Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debtsOther. Specify	
☐ No ☐ Yes		
Nonpriority Creditor's Name	Last 4 digits of account number	\$
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
□ No □ Yes	Curier. Opeony	
		
Nonpriority Creditor's Name	Last 4 digits of account number	
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
☐ At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
□ No □ Yes	Guier. Specify	

Debtor 1

First Name Middle Name Last Name

Case number (if known)_____

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			□ Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
0.1			710.0	Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	Last + digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. **Other.** Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

- 6a. _{\$}
- 6b. _{\$}
- 6c.
- 6d. + s
- 6e. \$_____

Total claim

- 6f. \$_____
- 6g. \$_____
- 6h. _{\$}
- 6i + c

Fill in this information to identify your case:						
Debtor	First Name	Middle Name	Last Name			
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name			
United States B	Bankruptcy Court for t	District of(State)	_			
Case number (If known)						

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you l	nave the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

æ		

First Name Middle Name Last Name

Case number (if known)_____

Additional Page if You Have More Contracts or Leases

	Person or	company with who	om you l	nave the contract or lease	What the contract or lease is for
2					
	Name				
	Number	Street			
	City		State	ZIP Code	•
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in this in	formation to iden	tify your case:	
Debtor 1 _	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States B	Bankruptcy Court for	the:	District of
Case number (If known)			(State)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

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. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

☐ No	(If you are filing a joint case, do n	ot list either spouse as	s a codebtor.)
Within the last 8 years, have y include Arizona, California, Idah		•	
	er spouse, or legal equivalent live	with you at the time?	
☐ No		-	
Yes. In which communit	ty state or territory did you live? $_$		Fill in the name and current address of that person.
Name of your spouse, former s	spouse, or legal equivalent		
Number Street			
City	State	ZIP Code	
shown in line 2 again as a co Schedule D (Official Form 100	debtor only if that person is a g 6D), <i>Schedule E/F</i> (Official Forn	Juarantor or cosignei	r. Make sure you have listed the creditor on
Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
			_
Name			Schedule D, line
Name Number Street			Schedule D, line
Number Street	Ciale	7ID Code	Schedule D, line
	State	ZIP Code	Schedule D, line
Number Street	State	ZIP Code	Schedule D, line
Number Street City Name	State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line
Number Street City	State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line
Number Street City Name	State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line
Number Street City Name Number Street			Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line
Number Street City Name Number Street			Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line
Number Street City Name Number Street City			Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Number Street City Name Number Street City Name			Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule G, line
	No Yes Within the last 8 years, have include Arizona, California, Idal No. Go to line 3. Yes. Did your spouse, form No Yes. In which communit Name of your spouse, former s Number Street City n Column 1, list all of your coshown in line 2 again as a co Schedule D (Official Form 106 Schedule E/F, or Schedule G	□ No □ Yes Within the last 8 years, have you lived in a community proper include Arizona, California, Idaho, Louisiana, Nevada, New Mexi □ No. Go to line 3. □ Yes. Did your spouse, former spouse, or legal equivalent live □ No □ Yes. In which community state or territory did you live?	Within the last 8 years, have you lived in a community property state or territory? include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas Include Arizona, Nevada, New Mexico, Puerto Rico, Pue

\square	htor	

First Name	Middle Name	Last Name	

Case number	(if known)		

Additional Page to List More Codebtors

	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					D. Oakastala D. Bras
	Name				Schedule D, line
	Nemel	Otrock			Schedule G, line
	Number	Street			Concadic of line
	City		State	ZIP Code	_
3					
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3	•				
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
_	City		State	ZIF Code	
3	Nama				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
_	City		State	ZIP Code	_
3					_ Schedule D, line
	Name				□ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3					_ ☐ Schedule D, line
	Name				Schedule E/F, line
	Number	Stroot			Schedule G, line
	Mullipel	Street			
	City		State	ZIP Code	_
3					Outside D. Free
_	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3					_
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
	Oity		Sidie	ZIF COUR	

Fill in this information to identify	your case:					
Debtor 1						
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		District of(State				
Case number		(State	,	Check if t	his is:	
(If known)				☐ An am	ended filing	
					olement showing postpetition e as of the following date:	chapter 13
Official Form 106I				MM / E	DD / YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the	ou are married and not filing se is not filing with you, d top of any additional pag	ng jointly, and yo	ur spouse is ormation ab	living with your spo	ou, include information about use. If more space is needed, a	your spouse. attach a
Fill in your employment		Dalitand			Dalidan O annan filling and	
information.		Debtor 1			Debtor 2 or non-filing spo	use
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed	ed		☐ Employed☐ Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation					
	Employer's name					
	Employer's address					
		Number Street			Number Street	
	Harrian a social second the second	City	State ZIP	Code	City State Z	.IP Code
	How long employed there	e?				
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated		n. If you have nothi	ing to report f	or any line, w	rite \$0 in the space. Include your	non-filing
If you or your non-filing spouse had below. If you need more space, at			rmation for a	Il employers f	or that person on the lines	
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			2. \$		\$	
3. Estimate and list monthly over	time pay.		3. + \$		+ \$	
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$		\$	

First Name	Middle Name	Last Name

				For Debtor 1		For Debtor 2 or non-filing spouse	
	Copy line 4 here	4.		\$		\$	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	. :	\$		\$	
	5b. Mandatory contributions for retirement plans	5b.		\$		\$	
	5c. Voluntary contributions for retirement plans	5c.		\$		\$	
	5d. Required repayments of retirement fund loans	5d.		\$		\$	
	5e. Insurance	5e.		\$		\$	
	5f. Domestic support obligations	5f.		\$		\$	
	5g. Union dues	5g.		\$		\$	
	5h. Other deductions. Specify:	5h.	+	\$		+ \$	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	;	\$		\$	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$		\$	
8.	List all other income regularly received:						
	8a. 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.	8a.	;	\$		\$	
	8b. Interest and dividends	8b.		\$		\$	
	8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	nt					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$		\$	
	8d. Unemployment compensation	8d.	. :	\$		\$	
	8e. Social Security	8e.	. ;	\$		\$	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ice 8f.	;	\$		\$	
	8g. Pension or retirement income	8g.	. :	\$		\$	
	8h. Other monthly income. Specify:	8h.	+:	·		+\$	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$		\$]
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10).	\$	+	\$	s
11.	State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, y friends or relatives.	our o	depe	•			
	Do not include any amounts already included in lines 2-10 or amounts that are			able to pay expe	nses		
	Specify:					11.	+ \$
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S					•	
13	S. Do you expect an increase or decrease within the year after you file this f	form'	?				Combined monthly income

Fill in this inforr	nation to identify y	our case:						
Debtor 1					Check if this is			
First Debtor 2	Name	Middle Name	Last Name		-			
(Spouse, if filing) First	Name	Middle Name	Last Name		☐ An amende☐ A supplem		-	etition chapter 13
United States Bank	ruptcy Court for the: _		District of	itate)			the following	
Case number				,	MM / DD / Y	YYY	_	
(ii kilowii)								
Official For	m 106J							
Schedu	le J: You	ır Expense	es					12/15
	re space is neede	ssible. If two married pe d, attach another sheet						-
Part 1: Des	cribe Your Hous	sehold						
1. Is this a joint ca	ise?							
☐ No. Go to li☐ Yes. Does ☐		eparate household?						
☐ No								
☐ Yes	. Debtor 2 must file	Official Form 106J-2, Ex	penses for S	eparate Househ	old of Debtor 2.			
2. Do you have de	pendents?	☐ No		Dependent's rel	lationship to	D	ependent's	Does dependent live
Do not list Debto Debtor 2.	or 1 and	Yes. Fill out this info each dependent		Debtor 1 or Deb			ge	with you?
Do not state the	dependents'							☐ No ☐ Yes
names.								□ No
								☐ Yes
								☐ No
								☐ Yes
						_		☑ No☑ Yes
								☐ No
								Yes
3. Do your expens expenses of pe		□ No □ Yes						
	•							
		ng Monthly Expenses						
	-	bankruptcy filing date u kruptcy is filed. If this is	-	_			-	•
	paid for with non-	cash government assis	stance if you	know the value	e of			
		it on Schedule I: Your I	_				Your exper	nses
4. The rental or h		xpenses for your reside	ence. Include	first mortgage p	-	4.	\$	
If not included	l in line 4:							
4a. Real esta	te taxes					4a.	\$	
4b. Property,	homeowner's, or re	nter's insurance				4b.	\$	
4c. Home ma	intenance, repair, a	nd upkeep expenses				4c.	\$	
4d. Homeowr	er's association or	condominium dues				4d.	\$	

_		
De	htor.	1

First Name	Middle Name	Last Name	

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$
J.		J.	
6.			
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare.		¢
	Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18	Your payments of alimony, maintenance, and support that you did not report as deducted from		
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Debtor		First Name Middle Name Last Name Case number (if know	rn)	
21. O	ther . Sp	ecify:	21.	+\$
22. C	alculate	your monthly expenses.		
22	2a. Add	ines 4 through 21.	22a.	\$
22	2b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22	2c. Add l	ine 22a and 22b. The result is your monthly expenses.	22c.	\$
23. Ca	lculate :	your monthly net income.		
23a	. Copy	line 12 (your combined monthly income) from Schedule I.	23a.	\$
23b	. Copy	your monthly expenses from line 22c above.	23b.	- \$
230	. Subt	ract your monthly expenses from your monthly income.		
	The	result is your monthly net income.	23c.	\$
24. Do	you ex	pect an increase or decrease in your expenses within the year after you file this form?		
		le, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage?		
	No.			
	Yes.	Explain here:		

Fill in this inf	formation to iden	tify your case:	
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)		Middle Name	Last Name
United States E	Bankruptcy Court for	the:	District of
Case number (If known)			(State)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	eve read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I ha at they are true and correct.	eve read the summary and schedules filed with this declaration and

Fill in this in	formation to identify y	our case:	
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States F	Bankruptcy Court for the: _	District of _	
Case number (If known)			_

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

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. On the top of any additional pages, write your name and case number (if known). Answer every question.

	t is your current marital	t Your Marital Stat	us and Where Y	ou Lived Before	
	Married Not married				
□ N	ng the last 3 years, have No Yes. List all of the places				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street		From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
_	City	State ZIP Code		City State ZIP Code	
	Number Street		From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
	City	State ZIP Code		City State ZIP Code	
state	es and territories include i	Arizona, California, Idah	no, Louisiana, Neva	valent in a community property state or territory? (da, New Mexico, Puerto Rico, Texas, Washington, and m 106H).	Community property I Wisconsin.)

Explain the Sources of Your Income

Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have income No Yes. Fill in the details.	ed from all jobs and all bus	inesses, including part-ti	me activities.	ndar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions are exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
YYYY				
•	•	•	Wages, commissions, bonuses, tips Operating a business	\$
(January 1 to December 31,	bonuses, tips Operating a business this year or the two previnceme is taxable. Examples ments; pensions; rental income a joint case and you have	s of other income are alir ome; interest; dividends e income that you receiv	bonuses, tips Operating a business mony; child support; Social ; money collected from laws yed together, list it only once	suits; royalties; and
Old you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from	bonuses, tips Operating a business this year or the two previnceme is taxable. Examples ments; pensions; rental income a joint case and you have	s of other income are alir ome; interest; dividends e income that you receiv	bonuses, tips Operating a business mony; child support; Social ; money collected from laws yed together, list it only once	suits; royalties; and
Olid you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filling List each source and the gross income from	bonuses, tips Operating a business this year or the two previous periods is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Descriptions.	s of other income are alir ome; interest; dividends e income that you receiv	bonuses, tips Operating a business mony; child support; Social ; money collected from laws yed together, list it only once at you listed in line 4.	suits; royalties; and e under Debtor 1. Gross income from each source
Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)	bonuses, tips Operating a business mony; child support; Social and the property collected from laws are year together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No	bonuses, tips Operating a business this year or the two previous is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)	bonuses, tips Operating a business mony; child support; Social is; money collected from laws are detected together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions)	bonuses, tips Operating a business mony; child support; Social and the property collected from laws are year together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
Did you receive any other income during Include income regardless of whether that ir unemployment, and other public benefit pay gambling and lottery winnings. If you are filir List each source and the gross income from No Yes. Fill in the details.	bonuses, tips Operating a business this year or the two previous is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$\begin{array}{c} Gross income from each source (before deductions and exclusions) \$\begin{array}{c} &\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\begin{array}{c} \$\b	bonuses, tips Operating a business mony; child support; Social and the property collected from laws are year together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)

Part 3:	List Certain Payments You Made Before	re You Filed	for Bankruptcy		
6. Are eith	ner Debtor 1's or Debtor 2's debts primarily c	onsumer debt	s?		
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a persor			defined in 11 U.S.C. § 101(8) as
	During the 90 days before you filed for bankrup	otcy, did you pa	ay any creditor a total of \$8	3,575* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. Do child support and alimony. Also, do not	o not include pa	ayments for domestic supp	oort obligations, such as	
	* Subject to adjustment on 4/01/28 and every 3	3 years after th	at for cases filed on or afte	er the date of adjustment.	
☐ Yes	s. Debtor 1 or Debtor 2 or both have primarily	consumer de	bts.		
	During the 90 days before you filed for bankrup	otcy, did you pa	ay any creditor a total of \$6	600 or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include paymen	domestic supp	ort obligations, such as ch	nild support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name		\$	\$	☐ Mortgage
	Number Street				☐ Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
		_	\$	\$	☐ Mortgage

					Loan repayment
					☐ Suppliers or vendors
City	State	ZIP Code			Other
				\$ \$	Mortgage
Creditor's Name					☐ Car
Number Street			-		☐ Credit card
					☐ Loan repayment
					☐ Suppliers or vendors
City	State	ZIP Code			☐ Other
				\$ \$	Mortgage
Creditor's Name					☐ Car
					☐ Credit card
Number Street					Loan repayment
					Suppliers or vendors
					☐ Other
City	State	ZIP Code			

Within 1 year before you filed for bankruptcy, dinsiders include your relatives; any general partners or portaions of which you are an officer, director, pogent, including one for a business you operate as uch as child support and alimony.	s; relatives of any erson in control, o	general partners; p	partnerships of which more of their voting	h you are a general partner; securities; and any managing
No				
Yes. List all payments to an insider.	Dates of	Total amount	Amount you still	Reason for this payment
	payment	paid	owe	Troubon for time paymont
		\$	\$	
Insider's Name				
Number Street				
City State ZIP Code				1
		\$	\$	
Insider's Name				
Number Street				
Number offect				
City State ZIP Code	d you make any p	payments or trans	fer any property o	n account of a debt that benefited
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned	d by an insider.	Total amount paid		n account of a debt that benefited Reason for this payment Include creditor's name
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.	d by an insider. Dates of	Total amount	Amount you still	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code State ZIP	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider. Insider's Name Number Street	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, did in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider.	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider. Insider's Name Number Street	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die in insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider. Insider's Name Number Street	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
City State ZIP Code ithin 1 year before you filed for bankruptcy, die insider? clude payments on debts guaranteed or cosigned No Yes. List all payments that benefited an insider. Insider's Name Number Street City State ZIP Code	d by an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

Debtor 1

First Name	Middle Name	Last Name

Case number (if known)

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

and contract disputes.		small claims actions, d	, , , , , , , , , , , , , , , , , , , ,		
☑ No					
Yes. Fill in the details.					
	Nature	e of the case	Court or agency		Status of the case
Case title			Court Name		—— Pending
			odar ramo		On appeal
			Number Street		Concluded
Case number					
			City	State ZIP Code	
0 111					—— Pending
Case title			Court Name		On appeal
			Number Street		Concluded
			Number Street		Concluded
Case number			City	State ZIP Code	
		Describe the proper	ty	Date	Value of the property
		Describe the proper	ty	Date	Value of the property
		Describe the proper	ty	Date	Value of the property \$
Yes. Fill in the information below.		Describe the proper		Date	
Yes. Fill in the information below. Creditor's Name		_	ned	Date	
Yes. Fill in the information below. Creditor's Name		Explain what happed Property was to Property w	ned repossessed. foreclosed.	Date	
Yes. Fill in the information below. Creditor's Name Number Street		Explain what happer Property was to Property w	ned repossessed. foreclosed. garnished.		
Yes. Fill in the information below. Creditor's Name		Explain what happer Property was to Property w	ned repossessed. foreclosed.		
Yes. Fill in the information below. Creditor's Name Number Street		Explain what happer Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levic		
Yes. Fill in the information below. Creditor's Name Number Street		Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levic	ed.	\$Value of the propert
Yes. Fill in the information below. Creditor's Name Number Street		Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levic	ed.	\$
Yes. Fill in the information below. Creditor's Name Number Street City Sta		Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levie	ed.	\$Value of the propert
Yes. Fill in the information below. Creditor's Name Number Street City Sta		Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levie	ed.	\$Value of the proper
☐ Yes. Fill in the information below. ☐ Creditor's Name ☐ Number Street ☐ City Sta		Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levie	ed.	\$Value of the propert
☐ Yes. Fill in the information below. ☐ Creditor's Name ☐ Number Street ☐ City Sta		Explain what happed Property was a P	ned repossessed. foreclosed. garnished. attached, seized, or levid ty ned repossessed. foreclosed.	ed.	\$Value of the propert
Number Street City Sta	ite ZIP Code	Explain what happed Property was to Property w	ned repossessed. foreclosed. garnished. attached, seized, or levid ty ned repossessed. foreclosed.	ed. Date	\$Value of the propert

Ulluts Or tettise to make a narment nec-			
ounts or refuse to make a payment beca No	auss you owen a nest:		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
Creditor's Name		was taken	
			.
Number Street		<u> </u>	\$
City State ZIP Code	Last 4 digits of account number: XXXX		
			
	cy, was any of your property in the possession of an	assignee for the benefit	t of
ditors, a court-appointed receiver, a cus	todian, or another official?		
No Yes			
List Certain Gifts and Contribut	tions		
	cy, did you give any gifts with a total value of more t	than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	Value
		the gifts	Value
			value
Person to Whom You Gave the Gift			\$
Person to Whom You Gave the Gift			\$
Person to Whom You Gave the Gift			\$\$
			\$\$
			\$\$
Number Street			\$\$
Number Street City State ZIP Code			\$\$
Number Street City State ZIP Code			\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	\$\$ \$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	the gifts	\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$
Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave	\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts	Dates you gave	\$

bioi i	First Name Middle Name	Last Name		
ı. Wi	thin 2 years before you filed for ba	ankruptcy, did you give any gifts or contributions with a total valu	e of more than \$60	00 to any charity?
	No			
	Yes. Fill in the details for each gift of	or contribution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	that total more than \$600		T	
	Charity's Name			\$
	Chang's Name			
				\$
	Number Street			
	Number Street			
	City State ZIP Code			
art	6: List Certain Losses			
_	Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.		
				\$
				Ψ
art	7. List Certain Payments or	Transfers		
yo Ind	u consulted about seeking bankruclude any attorneys, bankruptcy petit	nkruptcy, did you or anyone else acting on your behalf pay or trai uptcy or preparing a bankruptcy petition? ion preparers, or credit counseling agencies for services required in you		to anyone
	No Yes. Fill in the details.			
_				
		Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Person Who Was Paid		made	
	Number Street			\$
				\$
	City State ZIP C	ada		
	Ony State ZIP C	oue		
	Email or website address			
	Email of website addless			
	Person Who Made the Payment, if Not You			

Tirst Name Middle Name Las	t Name	Case number (if known)	
	Description and value of any property	transformed	Data naumant or	Amount of
	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			r.
Number Street	-			Φ
	_			\$
	_			
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You				
o not include any payment or transfer that y No Yes. Fill in the details.	you nated on mile 10.			
	Description and value of any property	transferred	Date payment or transfer was made	Amount of pay
Person Who Was Paid	_			
Number Street	-			\$
	_			\$
City State ZIP Code ithin 2 years before you filed for bankru				
ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you had No	business or financial affairs? made as security (such as the granting	of a security interest o	r mortgage on your pro	pperty).
Person Who Received Transfer				
Number Street				
City State ZIP Code				
Person's relationship to you		1		
Person Who Received Transfer				
Number Street				
City Olds 7000				
City State ZIP Code				

Person's relationship to you _____

ithin 10 years before you filed for bankrure a beneficiary? (These are often called a) No Yes. Fill in the details. Name of trust			or similar device of w	Phich you Date transfer was made
re a beneficiary? (These are often called a. No Yes. Fill in the details.	sset-protection devices.)		or similar device of w	Date transfer
No Yes. Fill in the details.		rty transferred		
Yes. Fill in the details.	Description and value of the prope	rty transferred		
	Description and value of the prope	rty transferred		
Name of trust	Description and value of the prope	rty transferred		
Name of trust	-			was made
Name of trust	-			
8: List Certain Financial Account	s, Instruments, Safe Deposit	Boxes, and Storage	Units	
/ithin 1 year before you filed for bankrupt	cy, were any financial accounts o	r instruments held in y	our name, or for your	benefit,
osed, sold, moved, or transferred?				
clude checking, savings, money market, rokerage houses, pension funds, cooper			es in banks, credit un	ions,
l No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		instrument	closed, sold, moved, or transferred	closing or transfe
Name of Elemental Institution				
Name of Financial Institution	XXXX	☐ Checking		\$
Number Street		Savings		
		Money market		
City State ZIP Code		☐ Brokerage		
City State ZIP Code		□ Other		
	XXXX-	Checking		\$
Name of Financial Institution		☐ Savings		·
Number Street		☐ Money market		
		☐ Brokerage		
		☐ Other		
City State ZIP Code				

	unit or place other than your home within 1	year before you filed for bankruptc	y?
☐ No☐ Yes. Fill in the details.			
Tes. Fill III the details.	Who else has or had access to it?	Describe the contents	Do you stil have it?
			□ No
Name of Storage Facility	Name		Yes
Number Street	Number Street		
	City State ZIP Code		
City State 7ID C			
City State ZIP C	3de		
rt 9: Identify Property You h	lold or Control for Someone Else		
or hold in trust for someone. No Yes. Fill in the details.	that someone else owns? Include any prope	erty you borrowed from, are storing	ioi,
	Where is the property?	Describe the property	Value
-			
Owner's Name			\$
Number Street	Number Street		
	City State ZIP Code	9	
City State ZIP C	ode		
art 10: Give Details About Env	rironmental information		
r the purpose of Part 10, the following	g definitions apply:		
Environmental law means any federa	al, state, or local statute or regulation conce		
Environmental law means any federa hazardous or toxic substances, was:	• • • • • • • • • • • • • • • • • • • •	e water, groundwater, or other med	
Environmental law means any federa hazardous or toxic substances, was including statutes or regulations cor Site means any location, facility, or p	al, state, or local statute or regulation conce tes, or material into the air, land, soil, surfac ntrolling the cleanup of these substances, w property as defined under any environmenta	e water, groundwater, or other med astes, or material. I law, whether you now own, operat	ium,
Environmental law means any federa hazardous or toxic substances, was including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or Hazardous material means anything	al, state, or local statute or regulation conce tes, or material into the air, land, soil, surfac ntrolling the cleanup of these substances, w property as defined under any environmenta utilize it, including disposal sites. an environmental law defines as a hazardou	e water, groundwater, or other med astes, or material. I law, whether you now own, operat	ium, e, or
Environmental law means any federa hazardous or toxic substances, was including statutes or regulations cor Site means any location, facility, or putilize it or used to own, operate, or Hazardous material means anything substance, hazardous material, pollutions	al, state, or local statute or regulation conce tes, or material into the air, land, soil, surface introlling the cleanup of these substances, we property as defined under any environmenta utilize it, including disposal sites. an environmental law defines as a hazardoutant, contaminant, or similar term.	e water, groundwater, or other med astes, or material. I law, whether you now own, operates waste, hazardous substance, toxi	ium, e, or
Environmental law means any federa hazardous or toxic substances, was including statutes or regulations con Site means any location, facility, or putilize it or used to own, operate, or Hazardous material means anything substance, hazardous material, polluport all notices, releases, and proceed	al, state, or local statute or regulation concetes, or material into the air, land, soil, surfactorized, or material into the air, land, soil, surfactorized, and the cleanup of these substances, woroperty as defined under any environmenta utilize it, including disposal sites. an environmental law defines as a hazardoutant, contaminant, or similar term.	e water, groundwater, or other med astes, or material. I law, whether you now own, operates waste, hazardous substance, toxinen they occurred.	ium, e, or c
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Name of alite State Street Street State Street State St	e you notified any governmenta	ar arm or arry release or riazardous ri		
State Details Detail				
Number Street Number Street Oity State ZIP Code Gity State ZIP Code Gity State ZIP Code Gity State ZIP Code City State ZIP Code Court or agency Nature of the case Case title Court Name Cou	Yes. Fill in the details.	0	F	B. (
Number Street Number Street State ZIP Code		Governmental unit	Environmental law, if you know it	Date of notice
Number Street Number Street State ZIP Code				
City State ZIP Code Toty Stat	Name of site	Governmental unit		
City State ZIP Code Toty Stat	Number Street	Number Chrost		
re you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency	Number Street	Number Street		
re you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency		City State ZIP Co	ode	
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No Yes. Fill in the details. Court or agency	City State ZIF	P Code		
No Yes. Fill in the details. Court or agency	e you been a party in any judici	ial or administrative proceeding und	ler any environmental law? Include settleme	ents and orders.
Yes. Fill in the details. Court or agency		3		
Case title				
Case title Court Name		Court or agency	Nature of the case	
Case number Case number City State ZIP Code Conclud Case number City State ZIP Code Conclud Case number City State ZIP Code Conclud Case number City State ZIP Code Conclud Case number of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN		country against	1.00.00	case
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Case number City State ZIP Code Conclude Conclude Color Conclude Color		Court Name		On appe
Give Details About Your Business or Connections to Any Business A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN EIN:		Number Street		
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		Employer Identification number
	Describe the nature of the business	Do not include Social Security number or ITIN.
Business Name		
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
		From To
City State ZIP C	Code	10
/ithin 2 years before you filed for bastitutions, creditors, or other partical No Yes. Fill in the details below.		anyone about your business? Include all financial
Name		
Name	MM / DD / YYYY	
Number Street		
City State ZIP C	Code	
City State ZIP C	Code	
City State ZIP C	code	
12: Sign Below have read the answers on this Stanswers are true and correct. I under connection with a bankruptcy care.	ntement of Financial Affairs and any attachments lerstand that making a false statement, concealing se can result in fines up to \$250,000, or imprison	ng property, or obtaining money or property by frauc
have read the answers on this Stanswers are true and correct. I und n connection with a bankruptcy ca 18 U.S.C. §§ 152, 1341, 1519, and 38	ntement of Financial Affairs and any attachments lerstand that making a false statement, concealing se can result in fines up to \$250,000, or imprison 571.	ng property, or obtaining money or property by frauc
have read the answers on this Stanswers are true and correct. I und n connection with a bankruptcy ca I8 U.S.C. §§ 152, 1341, 1519, and 38	ntement of Financial Affairs and any attachments lerstand that making a false statement, concealingse can result in fines up to \$250,000, or imprison 571.	ng property, or obtaining money or property by frauc
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have read the answers on this Stanswers are true and correct. I und n connection with a bankruptcy calls U.S.C. §§ 152, 1341, 1519, and 38 Signature of Debtor 1 Date Did you attach additional pages to	ntement of Financial Affairs and any attachments lerstand that making a false statement, concealingse can result in fines up to \$250,000, or imprison 571. Signature of Debtor 2 Date	ng property, or obtaining money or property by frauc nment for up to 20 years, or both.
Sign Below I have read the answers on this Statement of the answers are true and correct. I under the connection with a bankruptcy can see the U.S.C. §§ 152, 1341, 1519, and 38 Signature of Debtor 1 Date Did you attach additional pages to Yes Did you pay or agree to pay someo	ntement of Financial Affairs and any attachments lerstand that making a false statement, concealingse can result in fines up to \$250,000, or imprison 571. Signature of Debtor 2 Date	ng property, or obtaining money or property by frauc nment for up to 20 years, or both. Als Filing for Bankruptcy (Official Form 107)?
Sign Below I have read the answers on this State answers are true and correct. I und in connection with a bankruptcy can also U.S.C. §§ 152, 1341, 1519, and 38 Signature of Debtor 1 Date Did you attach additional pages to No Yes Did you pay or agree to pay someo No	stement of Financial Affairs and any attachments lerstand that making a false statement, concealings can result in fines up to \$250,000, or imprison 571. Signature of Debtor 2 Date Your Statement of Financial Affairs for Individual one who is not an attorney to help you fill out barries.	ng property, or obtaining money or property by fraud nment for up to 20 years, or both. Als Filing for Bankruptcy (Official Form 107)?

Fill in this information to identify your case:			
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court	for the:	District of(State)
Case number (If known)			(6.8.6)

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: 0 information below.	Creditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes

Treat Minner	Middle Nieses	Last Names	

Case number	(If known)	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes

Part 3:

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

×	×
Signature of Debtor 1	Signature of Debtor 2
Date	Date MM / DD / YYYY

Fill in this information to identify the case:			
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:		District of
Case number (If known)			Chapter

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 3. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1: Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer	has notified me of
Name	
any maximum allowable fee before preparing any document for filing	or accepting any fee.
	Date
Signature of Debtor 1 acknowledging receipt of this notice	MM / DD / YYYY
	Date
Signature of Debtor 2 acknowledging receipt of this notice	MM / DD / YYYY

\square	sht	or	1

First Name	Middle Name	Last Name

Case number	(if known)				

Part 2: Declaration and Signature of the Bankruptcy Petition Preparer

I am a bankruptcy petition preparer or the office	er, principal, respo	onsible person, or partner of	a ba	nkruptcy petition preparer;
I or my firm prepared the documents listed belower preparer as required by 11 U.S.C. §§ 110(b), 1			e No	tice to Debtor by Bankruptcy Petition
if rules or guidelines are established according preparers may charge, I or my firm notified the accepting any fee from the debtor.				
Printed name Title, if any	/	Firm name, if it applies		
Number Street				
City State	ZIP Code	Contact phone		_
(Check all that apply.) ☐ Voluntary Petition (Form 101) ☐ Statement About Your Social Security Numbers (Form 121) ☐ Summary of Your Assets and Liabilities and Certain Statistical Information (Form 106Sum) ☐ Schedule A/B (Form 106A/B) ☐ Schedule C (Form 106C) ☐ Schedule D (Form 106D) ☐ Schedule E/F (Form 106E/F) ☐ Schedule G (Form 106G) ☐ Schedule H (Form 106H)	Schedules (Formula Statement of Under Chapter 7 Statement of Wonthly Incorrupt Statement of Abuse Under (Form 122A-1	bout an Individual Debtor's orm 106Dec) Financial Affairs (Form 107) Intention for Individuals Filing er 7 (Form 108) attement of Your Current me (Form 122A-1) Exemption from Presumption ler § 707(b)(2) ISupp) ans Test Calculation		Income (Form 122C-2) Application to Pay Filing Fee in Installments (Form 103A)
Bankruptcy petition preparers must sign and give to which this declaration applies, the signature and Signature of bankruptcy petition preparer or officer, principerson, or partner	d Social Security no		be pr	ovided. 11 U.S.C. § 110.
Printed name Signature of bankruptcy petition preparer or officer, principerson, or partner	pal, responsible	Social Security number of p	 erson	Date who signed MM / DD / YYYY
Printed name		_		

United States Bankruptcy Court ____ District Of _____

In re _	D 1.		Case No
	Debtor		Chapter
[Mu		ENSATION OF BANKRUPTCY I kruptcy petition preparer prepares t	PETITION PREPARER the petition. 11 U.S.C. § 110(h)(2).]
1.	attorney, that I prepared or caus debtor(s) in connection with this the filing of the bankruptcy pet	sed to be prepared one or more doc bankruptcy case, and that compensa	am not an attorney or employee of ar uments for filing by the above-named ation paid to me within one year before for services rendered on behalf of the ase is as follows:
For do	cument preparation services I have	agreed to accept	\$
Prior to	the filing of this statement I have	received	. \$
Balanc	e Due		. \$
2.	I have prepared or caused to be p	orepared the following documents (its	emize):
and pro	ovided the following services (item:	ize):	
3.	The source of the compensation p	paid to me was: Other (specify)	
4.	The source of compensation to be	e paid to me is:	
	Debtor	Other (specify)	
5.	The foregoing is a complete state of the petition filed by the debtor		nent for payment to me for preparation
6.	To my knowledge no other perso this bankruptcy case except as lis		document for filing in connection with
NAME		SOCIAL SECURITY NUMBER	
	Signature	Social Security number of bankru petition preparer*	iptcy Date
	name and title, if any, of ptcy Petition Preparer	Address	

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

^{*} If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

Fill	in this information to identify your case:					ly as directed in this form and in
Debte				F	Form 122A-1Supp	
Debte	First Name Middle Name	Last Name			1. There is no pr	resumption of abuse.
(Spou	se, if filing) First Name Middle Name d States Bankruptcy Court for the: District of	Last Name			abuse applies	on to determine if a presumption of swill be made under <i>Chapter 7</i> Calculation (Official Form 122A–2).
Case (If kno	numberown)				3. The Means Te	est does not apply now because of ary service but it could apply later.
					☐ Check if this is	an amended filing
Offi	cial Form 122A–1					
	apter 7 Statement of Your (Curre	nt Mor	nthly	Income	12/19
space additi do no <i>Abuse</i>	complete and accurate as possible. If two married people is needed, attach a separate sheet to this form. Include onal pages, write your name and case number (if know thave primarily consumer debts or because of qualify a Under § 707(b)(2) (Official Form 122A-1Supp) with this calculate Your Current Monthly Income	de the line i vn). If you k ring military	number to w believe that y	hich the	additional inform exempted from a p	ation applies. On the top of any presumption of abuse because you
1.	What is your marital and filing status? Check one only.					
	□ Not married. Fill out Column A, lines 2-11.□ Married and your spouse is filing with you. Fill out	both Colum	nns A and B, I	lines 2-1	I.	
	☐ Married and your spouse is NOT filing with you. You	ou and yoι	ır spouse ar	e:		
	☐ Living in the same household and are not leg	ally separa	ited. Fill out b	oth Colu	mns A and B, lines	2-11.
	Living separately or are legally separated. Fill under penalty of perjury that you and your spouse spouse are living apart for reasons that do not income.	e are legally	y separated u	inder nor	bankruptcy law tha	at applies or that you and your
	Fill in the average monthly income that you received to bankruptcy case. 11 U.S.C. § 101(10A). For example, if August 31. If the amount of your monthly income varied do Fill in the result. Do not include any income amount more income from that property in one column only. If you have	you are filin luring the 6 than once.	ng on Septem months, add For example,	ber 15, the incom the incom if both s	he 6-month period one for all 6 months pouses own the sa	would be March 1 through and divide the total by 6.
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, an (before all payroll deductions).	d commiss	sions		\$	\$
3.	Alimony and maintenance payments. Do not include particular Column B is filled in.	ayments from	m a spouse if	f	\$	\$
	All amounts from any source which are regularly paid of you or your dependents, including child support. Ir from an unmarried partner, members of your household, y and roommates. Include regular contributions from a spoufilled in. Do not include payments you listed on line 3.	nclude regul your depend	lar contributio dents, parents	ons s,	\$	\$
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$	\$			
	Ordinary and necessary operating expenses	- \$	- \$	Copy_		
	Net monthly income from a business, profession, or farm	\$	\$	here	\$	\$
6.	Net income from rental and other real property Gross receipts (before all deductions)	Debtor 1 \$	Debtor 2 \$			
	Ordinary and necessary operating expenses	- \$	- \$			
	Net monthly income from rental or other real property	\$	\$	Copy here	\$	\$
7.	Interest, dividends, and royalties				\$	\$

or 1			
	First Name Middle Name Last Name		
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Une	employment compensation	\$	
	not enter the amount if you contend that the amount received was a benefit ler the Social Security Act. Instead, list it here:		
	or you\$s for your spouse\$		
	nsion or retirement income. Do not include any amount received that was a		
ben not Unit disa pay doe	lefit under the Social Security Act. Also, except as stated in the next sentence, do include any compensation, pension, pay, annuity, or allowance paid by the ted States Government in connection with a disability, combat-related injury or ability, or death of a member of the uniformed services. If you received any retired paid under chapter 61 of title 10, then include that pay only to the extent that it is not exceed the amount of retired pay to which you would otherwise be entitled if red under any provision of title 10 other than chapter 61 of that title.	\$	\$
Do las as a terro	ome from all other sources not listed above. Specify the source and amount. not include any benefits received under the Social Security Act; payments received a victim of a war crime, a crime against humanity, or international or domestic orism; or compensation, pension, pay, annuity, or allowance paid by the United tes Government in connection with a disability, combat-related injury or disability, or allowance of the uniformed services. If necessary, list other sources on a parate page and put the total below.		
		\$	\$
		\$	\$
			·
To	atal amounts from separate pages, if any	+ ¢	+ ¢
	otal amounts from separate pages, if any.	+ \$	+ \$
1. Cal	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B.	+ \$	+ \$ + \$ = \$
1. Cal	culate your total current monthly income. Add lines 2 through 10 for each	+ \$	+ \$ =
1. Cal	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B.	+ \$ \$	+= =
1. Calcool.	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You	+ \$	+ \$ =
1. Calo	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps:	\$	+ \$ = \$
1. Calcool	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps:	\$	+ \$ = \$
1. Caldool.	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps:	\$	+ \$ = \$
1. Calcool.	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11. Multiply by 12 (the number of months in a year).	\$	+ \$ = \$
1. Calcolu colu 2. Calc 12a.	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11	\$	Total curre monthly inc
1. Calcool. Part 2 2. Calco 12a. 12b.	culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11	\$	Total curre monthly inc
1. Calcolulus 2. Calcolulus 12a. 12b. 12b. 15ill i	Culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11 Multiply by 12 (the number of months in a year). The result is your annual income for this part of the form. culate the median family income that applies to you. Follow these steps:	\$	Total curre monthly inc
1. Calcoller coller col	Culate your total current monthly income. Add lines 2 through 10 for each Jumn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11. Multiply by 12 (the number of months in a year). The result is your annual income for this part of the form. culate the median family income that applies to you. Follow these steps: in the state in which you live.	\$	+ \$ = \$
1. Calcolulus Columbia Calcolulus	Culate your total current monthly income. Add lines 2 through 10 for each umn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You Culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11	\$	+ \$ = \$
1. Calcolle colle	Culate your total current monthly income. Add lines 2 through 10 for each Jumn. Then add the total for Column A to the total for Column B. Determine Whether the Means Test Applies to You culate your current monthly income for the year. Follow these steps: Copy your total current monthly income from line 11. Multiply by 12 (the number of months in a year). The result is your annual income for this part of the form. culate the median family income that applies to you. Follow these steps: in the state in which you live. in the number of people in your household. in the median family income for your state and size of household. find a list of applicable median income amounts, go online using the link specified in ructions for this form. This list may also be available at the bankruptcy clerk's office.	\$the separate	+ \$ = \$

Debtor 1				Case number (if known)
	First Name	Middle Name	Last Name	

Part 3:	Sign Below	
	By signing here, I declare under penalty of perjury that the ir	nformation on this statement and in any attachments is true and correct.
	×	×
	Signature of Debtor 1	Signature of Debtor 2
	Date MM / DD / YYYY	Date
	If you checked line 14a, do NOT fill out or file Form 122A	n–2.
	If you checked line 14b, fill out Form 122A-2 and file it w	rith this form.

Fill in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1 First Name Middle Name Last Name	According to the calculations required by this Statement:
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	1. There is no presumption of abuse.
United States Bankruptcy Court for the: District of	☐ 2. There is a presumption of abuse.
Case number	
(If known)	☐ Check if this is an amended filing
Official Form 122A–2 Chapter 7 Means Test Calculation	04/25
To fill out this form, you will need your completed copy of Chapter 7 Sta	tement of Your Current Monthly Income (Official Form 122A-1).
• • • • • • • • • • • • • • • • • • • •	g together, both are equally responsible for being accurate. If more space to which the additional information applies. On the top of any additional
Copy your total current monthly income.	Copy line 11 from Official Form 122A-1 here
2. Did you fill out Column B in Part 1 of Form 122A-1?	
☐ No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your household expenses of you or your dependents. Follow these steps:	spouse's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you regularly used for the household expenses of you or your dependents?	u reported for your spouse NOT
☐ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income
	\$
	\$
	+ \$
Total	\$ Copy total here → -\$
4. Adjust your current monthly income. Subtract the total on line 3 from line	ne 1. \$

First Name Middle Name Last Name

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

S_____

7b. Number of people who are under 65

X

7c. Subtotal. Multiply line 7a by line 7b.

Copy here \$_____

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

7e. Number of people who are 65 or older

X ____

7f. **Subtotal.** Multiply line 7d by line 7e.

Copy here

g. Total. Add lines 7c and 7f.....

Copy total here

Debtor 1				Case number (if known)
	First Name	Middle Name	Last Name	

Local Standards You must use the IRS Local Standards to	answer the questions in	lines 8-15.	
Based on information from the IRS, the U.S. Trustee Program bankruptcy purposes into two parts: Housing and utilities – Insurance and operating expenses Housing and utilities – Mortgage or rent expenses	has divided the IRS Lo	ocal Standard for	housing for
To answer the questions in lines 8-9, use the U.S. Trustee Pro To find the chart, go online using the link specified in the separate This chart may also be available at the bankruptcy clerk's office.		1.	
8. Housing and utilities – Insurance and operating expenses dollar amount listed for your county for insurance and operatin			
9. Housing and utilities – Mortgage or rent expenses:			
9a. Using the number of people you entered in line 5, fill in the for your county for mortgage or rent expenses		\$	
9b. Total average monthly payment for all mortgages and othe	r debts secured by your	home.	
To calculate the total average monthly payment, add all an contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60.			
Name of the creditor	Average monthly payment		
	\$		
	\$		
	+ \$		
Total average monthly payment	\$	Copy here → -\$_	Repeat this amount on line 33a.
9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line rent expense). If this amount is less than \$0, enter \$0		\$_	Copy \$
10. If you claim that the U.S. Trustee Program's division of the the calculation of your monthly expenses, fill in any additi			rrect and affects \$
Explain why:	·		
11. Local transportation expenses: Check the number of vehicle 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12.			
12. Vehicle operation expense: Using the IRS Local Standards a operating expenses, fill in the <i>Operating Costs</i> that apply for you			

First Name Last Name Middle Name

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1

Describe Vehicle 1:

13a. Ownership or leasing costs using IRS Local Standard.

here

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1 Average monthly payment Repeat this Copy Total average monthly payment amount on line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 expense

Vehicle 2

Describe Vehicle 2:

Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.

- 13d. Ownership or leasing costs using IRS Local Standard.
- 13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2 Average monthly payment Repeat this Copy Total average monthly payment amount on here line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 expense Subtract line 13e from 13d. If this amount is less than \$0, enter \$0..... here ...

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.

23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.

Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.

24. Add all of the expenses allowed under the IRS expense allowances.

Add lines 6 through 23.

Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.					
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.					
Health insurance \$					
Disability insurance \$					
Health savings account					
Total \$ Copy total here ->	\$				
Do you actually spend this total amount?					
□ No. How much do you actually spend? □ Yes					
26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$				
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.	\$				
28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.	\$				
 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$214.58* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. * Subject to adjustment on 4/01/28, and every 3 years after that for cases begun on or after the date of adjustment. 	\$				
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.					
31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).	+ \$				
32. Add all of the additional expense deductions. Add lines 25 through 31.	\$				

	Deductions	for	Debt	Pav	vment
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33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Mortgages on your home:			Average monthly payment	
33a.	Copy line 9b here		→	\$	
	Loans on your first two vehicles:				
33b.	Copy line 13b here		·····	\$	
33c.	Copy line 13e here.			\$	
33d.	List other secured debts:				
	Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
			☐ No ☐ Yes	\$	
			☐ No ☐ Yes	\$	
			☐ No ☐ Yes	+ \$	
33e. To	otal average monthly payment. Add lines	33a through 33d		\$	Copy total here

- 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?
 - ☐ No. Go to line 35.
 - Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount	
		\$	÷ 60 =	\$	
		\$	÷ 60 =	\$	
		\$	÷ 60 =	+ \$	
			Total	\$	Copy tota

- 35. Do you owe any priority claims such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.
 - No. Go to line 36.
 - ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims

÷ 60	
 - 00	

\$_____

Dobtor	1
Deptor	1

First Name	Middle Name	Last Name

Case number (ii	f known)
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instructions for this form. Bankruptcy Basics may also be	ruptcy Basics specified in the se			
☐ No. Go to line 37.	or available at the balling aproy of			
☐ Yes. Fill in the following information.				
Projected monthly plan payment if you were fili	ng under Chapter 13	\$		
Current multiplier for your district as stated on t Administrative Office of the United States Cour North Carolina) or by the Executive Office for U other districts).	he list issued by the ts (for districts in Alabama and	×	_	
To find a list of district multipliers that includes link specified in the separate instructions for thi available at the bankruptcy clerk's office.				
Average monthly administrative expense if you	were filing under Chapter 13	\$	Copy total	\$
37. Add all of the deductions for debt payment. Add lines 33e through 36				\$
Total Deductions from Income				
38. Add all of the allowed deductions.				
Copy line 24, All of the expenses allowed under IRS expense allowances	\$			
Copy line 32, All of the additional expense deductions	\$			
Copy line 37, All of the deductions for debt payment	+\$	-		
Total deductions	\$	Copy total here	→	\$
Part 3: Determine Whether There Is a Presump	otion of Abuse			
Part 3: Determine Whether There Is a Presump 39. Calculate monthly disposable income for 60 months	otion of Abuse			
	\$			
39. Calculate monthly disposable income for 60 months	\$			
39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income	\$ - \$	Copy here → \$		
39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions	\$ - \$	here \$		
 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a. 	\$ - \$. \$	here→ \$ x 60	Copy here →	\$
39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a. For the next 60 months (5 years)	\$	here→ \$ x 60		\$
39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a. For the next 60 months (5 years)	\$ \$ \$ neck the box that applies:	here→ \$ x 60	here	\$
39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a. For the next 60 months (5 years)	\$	here → \$ x 60	here→	\$
39a. Copy line 4, adjusted current monthly income 39b. Copy line 38, Total deductions 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2) Subtract line 39b from line 39a. For the next 60 months (5 years)	\$	here → \$ x 60	here→	\$

Debtor 1					Case number (if kn			
Deptor 1	First Name	Middle Name	Last Name		Case number (irkn	own)		
41. 41	Summary of	f Your Assets and	otal nonpriority unsec d Liabilities and Certain may refer to line 3b on	Statistical Information	Schedules	\$		
						x .25	_	
41	-		rity unsecured debt. 11			\$	Copy here→	\$
is (25% of your ur	you have left over afternsecured, nonpriority o		wed deductions			
	Line 39d is le Go to Part 5.	ess than line 411	o. On the top of page 1	of this form, check box	x 1, There is no presui	mption of abuse.		
			than line 41b. On the to 4 if you claim special ci			e is a presumptic	on	
Part 4:			ecial Circumstances		iustments of current	monthly income	e for which t	there is no
		ive? 11 U.S.C. §		onal expenses of au		monany moon	0 101 1111011 1	
	o. Go to Part 5							
☐ Ye	es. Fill in the foll for each iten	lowing information. You may inclu	on. All figures should refl de expenses you listed	lect your average mor in line 25.	thly expense or incom	ne adjustment		
	adjustments		planation of the special creasonable. You must all ents.					
	Give a detail	led explanation of	the special circumstance	es		Average month or income adju		
						\$		
						\$		
						\$		
						\$		
Part 5:	Sign Belov	v						
	By signing he	ere, I declare und	der penalty of perjury tha	at the information on t	his statement and in a	ny attachments is	s true and co	rrect.
	×			×				

Signature of Debtor 1

Date MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Date