

DEBT / LEASE FORM

Your Last Name: _____

INSTRUCTIONS: Complete one of these forms for **EVERY** debt and lease you have, **INCLUDING** those you that do not want "included" in your bankruptcy or you think would not be discharged. We still need to know about it to give you complete legal advice. **Attach** a copy of the creditor's most recent statement or bill to the back of the form, if possible. Also, if you own real property and a **judgment** is entered against you and you don't tell us about the judgment, you should assume that any judgment **lien will not be released** if you want to keep the property.

1. Creditor's Name	
Creditor's Address (Correspondence) [NOT payment address]	
City, State, ZIP	
Your Account Number	
2. When did you <u>open</u> this account?	Year: _____
3. How much is owed to the creditor?	\$ _____
3. Has this debt been turned over to an attorney or a collection agency?	<input type="checkbox"/> YES <input type="checkbox"/> NO If your answer is "YES," please give the collector's name and <u>complete</u> mailing address in this space:
4. What was the debt for? [Circle one and give details]	Home Car Medical/Dental Credit Card Business Ticket Pay Day Loan Other Describe Purchase/Debt: _____
5. Do you and this creditor agree on the balance due?	<input type="checkbox"/> YES <input type="checkbox"/> NO Comments: _____
6. Is this debt "secured" by your home, car or any other real or personal property (such as a computer, furniture or TV)?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If the answer is "YES," what is the loan secured by?</i> [circle one, if applicable] Home Car Household Good(s) Business Equipment Describe the collateral in some detail: _____
7. Are you current on the payments?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If you are behind on a house, car or lease:</i> How many <i>payments</i> are you behind? # _____ What is the <i>dollar amount</i> you are behind? \$ _____
8. If you are married, are both spouses liable for this debt?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If your answer is "NO," which spouse is liable?</i> <input type="checkbox"/> HUSBAND <input type="checkbox"/> WIFE
9. Has anyone (other than a spouse) guaranteed, cosigned or otherwise become liable for this debt?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If your answer is "YES," please give person's name and their <u>complete</u> mailing address in this space:</i>
10. Have you been sued on this debt?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If your answer is "YES," please attach court papers.</i>
11. Has a judgment been entered against you on this debt?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If your answer is "YES," please attach court papers.</i>