CLIENT QUESTIONNAIRE

Thank you very much for calling The Law Offices of Stephen Marshall for legal assistance relating to your debt problems. We can provide you with the most helpful and accurate advice only if we have a complete and accurate understanding of your current financial situation.

Please fill out this form as completely as possible. Please provide us with emergency phone or address contact information. If you have e-mail, please let us know - this is an excellent way for us to contact you and we can use e-mail to keep you up-to-date with legal topics of interest.

If you don't understand a question, please ask for assistance. We ask that you list each and every financial obligation you have in the "creditor boxes." If you need more space, please use the back or photocopy the page of boxes.

Please also remember to list every creditor to whom you are obligated. This means, for example, that if you have co-signed for your nephew's car loan, that car lien-holder is your creditor. Similarly, you should list debts even if you think the creditor has written off the loan or if you think that someone else may pay the bill in the future (i.e. a medical bill that may be covered by insurance). Please provide us with the correspondence address for each creditor rather than the billing address.

If you have copies of your bills, please bring them with you to our office. We also ask that you bring a paycheck stub or provide payroll information for both you and your spouse. Even if your spouse does not want to participate, we still need to know about your household expenses and income.

One of the most important items of information that you can provide relates to whether a debt is "secured" or "unsecured." A "secured" debt is a debt that is backed by collateral, such as a house, car or even household items. By contrast, an "unsecured" debt is backed only by your signature. Examples of unsecured debts are credit card bills and medical bills. Please note that many finance companies ask you to list household goods at the time you obtain your loan. This usually means that you may have given the finance company a security interest in your property.

Finally, if you have a house or car, you will need a copy of the insurance declarations page – not just the insurance card.

Again, thank you for choosing the Law Offices of Stephen Marshall. We will make every effort to see to it that your experience as our client is a pleasant one. We thank you for allowing us to serve you.

PERSONAL INFORMATION

Emergency Action Alert
Foreclosure?
Repossession?
Wage Garnishment?

Today's date:_____

How did you hear about us?_____

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

Maiden name/former names:_____

Social Security Number:_____ Marital status:_____

Your address:_____ Apt. #:_____ ☐Rent ☐Own

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

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

E-Mail address:_____

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

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

Spouse's maiden/former name:_____

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

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

_____

How long have you lived at your home address:_____

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

Income Information

Marital Status:_____

	Yourself	Spouse
Job title/occupation:	_____	_____
Employer:	_____	_____
How long there:	_____	_____
Payroll address:	_____	_____
City, ST Zip	_____	_____
Payroll office phone #:	_____	_____
Date next paycheck expected	_____	_____

Children & Step-children

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

Expected changes in income:

Describe when & why:_____

_____

_____

Income & Expenses

	Yourself	Spouse
How often are you paid?	_____	_____
GROSS PAY PER PAYCHECK	_____	_____
Payroll deductions:		
- FICA (Soc. Sec.)	_____	_____
- Federal tax	_____	_____
- Medicare	_____	_____
- State tax	_____	_____
- Insurance	_____	_____
- Savings/bonds	_____	_____
- Uniform/union	_____	_____
- Pension/401(k)	_____	_____
- 401(k) loan	_____	_____
- Credit Union savings	_____	_____
- Credit Union loan	_____	_____
- Child support	_____	_____
- Garnishments	_____	_____
TAKE HOME PAY PER PAYCHECK:	_____	_____

Other sources of income (please describe) _____

_____

Household Expenses

	Household expenses	Attorney's Notes
Rent/mortgage payments	_____	_____
Electric bill	_____	_____
Gas bill	_____	_____
Water/sewer	_____	_____
Telephone	_____	_____
Cable TV	_____	_____
Home maintenance	_____	_____
Food	_____	_____
Clothing	_____	_____
Laundry/dry cleaning	_____	_____
Medical/dental	_____	_____
Gasoline/bus fare	_____	_____
Entertainment	_____	_____
Charity/church	_____	_____
Homeowners/renter's insurance	_____	_____

Life insurance	_____	_____
Health insurance (not deducted from pay)	_____	_____
Auto insurance	_____	_____
Non-payroll taxes	_____	_____
Car/truck payment	_____	_____
Alimony	_____	_____
Child support paid out	_____	_____
Child care expenses	_____	_____

(for attorney's use only)

_____

_____

_____

_____

Emergency matters . . .

Are you currently facing a mortgage foreclosure:_____

If so, how do you know:_____

For what month is the foreclosure scheduled:_____

Are you currently facing a vehicle repossession:_____

If so, who is the finance company?_____

How far are you behind?_____

Yearly income

Year	Gross income/year	Where employed?	Spouse's gross income/year	Where was spouse employed?
2018 (year to date)				
2017				
2016				

Tax returns

Year	Tax returns filed?	If not, why not	Spouse filed tax returns?	If not, why not?
2017				
2016				
2015				

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

_____

_____

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

_____

_____

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

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

Have your wages ever been garnished?

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

Have you ever lost a house to a mortgage foreclosure?

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

Please identify any real estate that is in your name.

Property address	**Date purchased**	**Purchase price**	**Value now**	**Total debt owed on property**

Please identify any cars or trucks you own.

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

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

Please describe:_____

Please identify any bank accounts you own.

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

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

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

Other assets not yet described (i.e. boats, stocks/bonds, antiques, musical instruments, valuable collections, insurance policies with cash value, guns, sporting equipment, jewelry, etc.)

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

Have you ever lost a car to repossession?

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

Recent activity

During the last 60 days, have you done any of the following	Yes/No	Name of lender/transferee	Amount borrowed w/in last 60 days
Used credit cards			
Taken cash advances			
Taken out any new loans			
Gave away or sold any property worth more than $600			

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

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

Personal Statement. During the course of your case, you may be asked "why are you filing for bankruptcy?" Please tell us in your own words why you need to file bankruptcy:

_____

_____

_____

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

_____ _____
Date Signature

_____ _____
Date Signature

DISCLOSURE CERTIFICATE

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

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

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

Date_____ Signature_____

Date_____ Signature_____

Avoiding Conflicts of Interest

Our law firm has represented many clients in the area over the past several years. In very rare cases, we must decline to accept a case because of a potential conflict of interest with another present or former client. For example, we would not be able to represent you if you are currently engaged in litigation with another of our clients.

Please advise us as to the following:

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

2. Has your spouse ever filed a bankruptcy?_____

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

   Name of opposing party:_____

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

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

   Name of the other party in this lawsuit:_____

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

   Why were you sued?:_____

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

   Type of case:_____

   Name of opposing party:_____

   What happened in this case:_____

   Type of case:_____

   Name of opposing party:_____

   What happened in this case:_____

Taxes Due

Internal Revenue Service Account Number:_____

Address:_____

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

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

Dept. of Revenue Account Number:_____

Address:_____

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

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

Other taxes:_____Account number:_____

Address:_____

What type of tax is this?_____Tax year:_____Taxes due (total)_____

In whose name:_____ Return filed?_____

Other taxes:_____Account number:_____

Address:_____

What type of tax is this?_____Tax year:_____Taxes due (total)_____

In whose name:_____ Return filed?_____

Mortgages & Real Estate

First Mortgage:_____ Acct. #:_____

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

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

Does payment include taxes & insurance?

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

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

Address of property:_____ Is this your residence?_____

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

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

Who is foreclosure attorney?_____

Second Mortgage:_____ Acct. #:_____

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

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

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

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

Address of property:_____ Is this your residence?_____

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

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

Who is foreclosure attorney?_____

Home Improvement loan:_____ Acct. #:_____

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

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

When did you take loan out:_____ How did you use money?:_____

Cars & Trucks

Vehicle 1 – (year, make & model)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

City:_____ ST: _____ Zip:_____ Payoff of loan: $_____

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

In whose name:_____ Co-signers:_____

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

Vehicle insurance company:_____ Ins. Expiration:_____

Vehicle 2 – (year, make & model)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

City:_____ ST: _____ Zip:_____ Payoff of loan: $_____

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

In whose name:_____ Co-signers:_____

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

Vehicle insurance company:_____ Ins. Expiration:_____

Vehicle 3 – (year, make & model)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

City:_____ ST: _____ Zip:_____ Payoff of loan: $_____

How far behind are you:_____In whose name:_____ Co-signers:_____

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

Furniture Loans

Furniture 1 (describe furniture):_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

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

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

Furniture 2 (describe furniture):_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

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

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

Furniture 3 (describe furniture):_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

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

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

Finance Companies and Loan Companies

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

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ If you pledged household goods, do you

want to surrender collateral and reduce or eliminate debt?_____

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

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ If you pledged household goods, do you

want to surrender collateral and reduce or eliminate debt?_____

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

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ If you pledged household goods, do you

want to surrender collateral and reduce or eliminate debt?_____

Loans for Jewelry, Gifts & Household Goods

Secured Creditor 1 (Describe items purchased)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ Do you still have items:_____

If not, who has them or what happened to items?_____

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

Secured Creditor 2 (Describe items purchased)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ Do you still have items:_____

If not, who has them or what happened to items?_____

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

Secured Creditor 3 (Describe items purchased)_____

Finance/loan company:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____ When did you take out loan:_____

Do you still have items:_____ If not, what happened to items?_____

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

Student Loans

Student Loan Creditor 1

Student loan lender:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ Name of school attended:_____

Is loan in default?_____ Is loan in deferment?:_____

Student Loan Creditor 2

Student loan lender:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take out loan:_____ Name of school attended:_____

Is loan in default?_____ Is loan in deferment?:_____

Health Club/Spa Membership

Health Club Finance Company:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

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

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

Credit Cards

Credit Card Lender 1:_____ Acct #:_____

Correspondence Address:_____ Monthly pymt: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 2:_____ Acct #:_____

Correspondence Address:_____ Monthly pymt: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 3:_____ Acct #:_____

Correspondence Address:_____ Monthly pymt: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

Credit Card Lender 4:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 5:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 6:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

Credit Card Lender 7:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 8:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

_____

Credit Card Lender 9:_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When is the last time you used this card?_____ What did you buy:_____

During the last 6 months, have you used this card more frequently than before_____

Collection agency name, address, acct #:_____

Medical Bills

Medical provider 1:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

_____

Medical provider 2:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

_____

Medical provider 3:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

Medical provider 4:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

_____

Medical provider 5:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

_____

Medical provider 6:_____ Acct. #:_____

Address:_____ Monthly payment:_____

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

In whose name:_____ Co-signers:_____

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

Collection agency name, address, acct #_____

_____

Other Creditors/Extra space

Pension or 401(k) Loans

Type of investment _____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

When did you take loan out?_____ How long will loan last?_____

_____

Creditor/Lender :_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

What type of debt is this?_____ What did you buy:_____

Collection agency name, address, acct #:_____

_____

Creditor/Lender :_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

What type of debt is this?_____ What did you buy:_____

Collection agency name, address, acct #:_____

_____

Creditor/Lender :_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

What type of debt is this?_____ What did you buy:_____

Collection agency name, address, acct #:_____

_____

Creditor/Lender :_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

What type of debt is this?_____ What did you buy:_____

Collection agency name, address, acct #:_____

_____

Creditor/Lender :_____ Acct #:_____

Address:_____ Monthly payment: $_____

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

In whose name:_____ Co-signers:_____

What type of debt is this?_____ What did you buy:_____

Collection agency name, address, acct #:_____

_____

For Attorney's Use Only -Debt Analysis Worksheet

_____ 1._____ _____ _____

_____ 2._____ _____ _____

_____ 3._____ _____ _____

_____ 4._____ _____ _____

_____ 5._____ _____ _____

_____ 6._____ _____ _____

_____ 7._____ _____ _____

_____ 8._____ _____ _____

_____ 9._____ _____ _____

_____ 10_____ _____ _____

_____ 11._____ _____ _____

_____ 12._____ _____ _____

_____ 13._____ _____ _____

_____ 14._____ _____ _____

_____ 15._____ _____ _____

_____ 16._____ _____ _____

_____ 17._____ _____ _____

_____ 18._____ _____ _____

Total Arrearage:_____ Total Priority:_____

Total Secured:_____ Total unsecured (100%)_____

Total general unsecured:_____ Total non-exempt equity:_____

Estimated plan payment:_____ % Plan:_____