

Richard G. Heston
Certified Consumer Bankruptcy Law Specialist
American Board of Certification
heston@hestonlaw.com

HESTON & HESTON
ATTORNEYS AT LAW

Halli B. Heston
Certified Bankruptcy Law Specialist
California Board of Legal Specialization
heston@hestonlaw.com

Benjamin R. Heston
Attorney at Law
ben@hestonlaw.com

IRVINE
19700 Fairchild Road, Suite 280
Irvine, CA 92612
Tel: (949) 222-1041
Fax: (949) 222-1043

Elmer Blanco
Certified Paralegal
eblanco@hestonlaw.com

RIVERSIDE
4192 Brockton Avenue, Suite 100
Riverside, CA 92501
Tel: (951) 290-2827
Fax: (949) 222-1043

BANKRUPTCY QUESTIONNAIRE

The decision to file bankruptcy is not an easy one. Usually, bankruptcy is the last resort for those suffering financial hardship as a result of numerous factors, including job loss, serious illness or a death within the family, divorce, catastrophic losses or other causes, more often than not beyond the individual debtor's control. Whatever the cause, once you have determined that bankruptcy represents the best choice to deal with overwhelming financial pressure, it is essential that your attorneys have the most accurate and complete information available.

Though it may be difficult to answer the personal questions in this booklet, this office needs your answers to complete the bankruptcy documents and to properly advise you of your rights and responsibilities. As with all communications between you and anyone in our office, the information you supply is CONFIDENTIAL. Never keep information from us because you are afraid or embarrassed. To properly advise you, we must have ALL the facts.

You might view these questions as your second step toward financial recovery. The first step was visiting our office. The information and instructions you read while completing these questions are not meant to replace your attorney, who is your advocate and counselor.

Please complete the following questionnaire to your best ability. If you are married and living with your spouse, please include all information as to your spouse as well, even if you are filing alone. If you believe any question does not apply to you, please mark it as "N/A"; do not simply skip it. Please be certain to answer each question fully. If space is inadequate, simply attach additional sheets, indicating the page and number of the question.

If you are uncertain as to the meaning of a question or your answer to it, please so indicate by marking the question or answer with a "?" in the margin next to it. If in doubt, give us a call.

After you have completed the questionnaire, please sign and date it where indicated at the end, and either mail it to HESTON & HESTON in the self-addressed envelope provided, or drop it at our offices, calling ahead to confirm someone will be in when you arrive.

Personal Information:

Full name: _____

Social Security No.: _____ Date of Birth: _____

Spouse's full name: _____

Spouses Social Security No.: _____ Spouse's Date of Birth: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Work: _____ Cell: _____

Other Tax Identification Numbers Used (i.e., for a business): _____

Marital status: Married , Separated , Divorced , Single

Are both spouses filing? Yes , No

If you answer yes, all of the following questions refer to both of you unless otherwise indicated.

Other Names:

Please list other names which either of you have used in the last six years, including maiden names, prior married names, partnership names, and fictitious business trade names (i.e., DBAs):

Prior Bankruptcies:

Has a bankruptcy proceeding ever been filed by or against you, your spouse, a former spouse, a corporation in which you owned stock, or a partnership of which you were a partner? Yes , No

Name of the person(s) or business entity: _____

Location of Bankruptcy Court where filed: _____

Case Number: _____ Type of case: Chapter 7 , 11 , 13

Date filed: _____ Discharge granted: Yes , No

Other comments:

Income:

Indicate the amount of gross (pre-tax) income you received from employment or the operation of a business this year to date and during the prior two years:

2018 YTD: Self: \$ _____ Source: _____
Spouse: \$ _____ Source: _____

2017: Self: \$ _____ Source: _____
Spouse: \$ _____ Source: _____

2016: Self: \$ _____ Source: _____
Spouse: \$ _____ Source: _____

Indicate any income received from *other sources* (not employment or operation of a business) this year to date and during the prior two years:

2018 YTD	Self: \$ _____	Source: _____
	Spouse: \$ _____	Source: _____
2017	Self: \$ _____	Source: _____
	Spouse: \$ _____	Source: _____
2016	Self: \$ _____	Source: _____
	Spouse: \$ _____	Source: _____

Payments to Relatives and Others:

N/A

List all loan payments which you have made during the past one year period to, or for the benefit of, relatives, corporations, or partnerships in which you have an ownership interest or of which you are an officer or director:

Name and address of creditor:

Relationship (if any) to the creditor: _____

Original amount and date of the loan: _____ Date: _____

Description or purpose of loan: _____

Please list the dates and amounts of payments you have made to this creditor within the past year:

Date: _____ Amount: _____

Date: _____ Amount: _____

Date: _____ Amount: _____

Total loan balance still owing: \$ _____

Additional? See attached

Other Payments Made Within the Past 90 Days:

N/A

List all payments made on all loans, credit cards, or other debts where the payments total \$600 or more within the past 90 Days:

Name and address of creditor:

Relationship (if any) to the creditor: _____

Original amount and date of the loan: \$ _____ Date: _____

Description or purpose of loan: _____

Please list the dates and amounts of payments you have made to this creditor within the past year:

Date: _____ Amount: _____

Date: _____ Amount: _____

Date: _____ Amount: _____

Total loan balance still owing: _____

Name and address of creditor:

Relationship (if any) to the creditor: _____

Original amount and date of the loan: \$ _____ Date: _____

Description or purpose of loan: _____

Please list the dates and amounts of payments you have made to this creditor within the past year:

Date: _____ Amount: _____

Date: _____ Amount: _____

Date: _____ Amount: _____

Total loan balance still owing: \$ _____

Additional? See attached

Pending Lawsuits:

N/A

Please attach a copy of a page of the court pleadings showing the names of the parties to the lawsuit, the case number, and the other parties' attorneys.

List any lawsuits, divorce proceedings, civil suits, small claims suits, and tax suits in which you are a party:

Name of Court: _____ Location: _____

Case No: _____ Nature of proceeding: _____

Title of Case (e.g., "Smith v. Jones"): _____

Status (i.e., pending, awaiting trial, judgment entered, etc.): _____

Name of Court: _____ Location: _____

Case No: _____ Nature of proceeding: _____

Title of Case (e.g., "Smith v. Jones"): _____

Status (i.e., pending, awaiting trial, judgment entered, etc.): _____

Additional? See attached

Terminated Lawsuits:

N/A

Please attach a copy of a page of the court pleadings showing the names of the parties to the lawsuit, the case number, and the other parties' attorneys.

Name of Court: _____ Location: _____

Case No: _____ Nature of proceeding: _____

Title of Case (e.g., "Smith v. Jones"): _____

Result or outcome (i.e., judgment entered, dismissed): _____

Date of judgment or dismissal: _____ Abstract of Judgment Recorded? Yes , No

Name of Court: _____ Location: _____

Case No: _____ Nature of proceeding: _____

Title of Case (e.g., "Smith v. Jones"): _____

Result or outcome (i.e., judgment entered, dismissed): _____

Date of judgment or dismissal: _____ Abstract of Judgment Recorded? Yes , No

Additional? See attached

Attachments, Seizures, and Garnishments:

N/A

List any property that has been either attached, garnished, or seized within the last one year period:

Name and address of creditor: _____

Describe property: _____

Value of property: _____ Date property taken: _____

Additional? See attached

Repossessions, Foreclosures, and Returns:

N/A

List any of your property that has been returned to, repossessed by, or foreclosed upon by a creditor within the past one year period:

Name and address of creditor: _____

Description of property: _____

Value of property: _____ Date property taken: _____

Additional? See attached

Assignments for the Benefit of Creditors:

N/A

List any assignments of your property made for the benefit of your creditors or any general settlement with your creditors within the last six months:

Name and address of creditor: _____

Date of assignment: _____ Terms of assignment: _____

Additional? See attached

Receiverships:

N/A

List any of your property being held by a custodian, receiver, trustee, or other court-appointed official:

Agent name and address: _____

Name and location of court: _____

Case name and number: _____

Date of the order appointing official: _____

Property description: _____ Property value: _____

Additional? See attached

Gifts and Charitable Contributions:

N/A

List any gifts, including gifts to family members, or charitable contributions with a value in excess of \$100 during the past one year period.

Recipient's name, relationship, and address: _____

Description of gift: _____

Value of gift: _____ Date(s) gift made: _____

Additional? See attached

Losses:

N/A

List any losses from fire, theft, or gambling during the past one year period.

Type of loss: _____ Date of loss: _____

Description and value of loss: _____

Was loss covered by insurance? Yes , No If yes, explain: _____

Additional? See attached

Debt Counseling or Bankruptcy:

N/A

List all payments made or property transferred by you or on your behalf, to any persons or entities, including attorneys, for consultation concerning debt consolidation or bankruptcy within the past one year period:

Name and address of the person or business with whom you conferred: _____

Dates and amounts of payments: _____

Additional? See attached

Sales, Transfers, and Security Interests:

N/A

List any property, including money, which you sold, transferred, gave away, put into another person's name, or given any kind of security interest in any property during the past two year period:

Name and address of transferee: _____

Description of property: _____

Value of property: _____ Date of transfer: _____

Type of transfer (i.e., sale, mortgage, promissory note): _____

What you received in exchange: _____

Additional? See attached

Transfers to Self-Settled Trust or Other Estate Planning Instrument or Device:

N/A

List any property which you transferred to a self-settled trust or other estate planning instrument or device of which you are a beneficiary during the past ten year period:

Name of the Trust, Instrument, or Device: _____
Date of transfer: _____
Description of value or property which was transferred: _____

Additional? See attached

Closed Accounts with Banks and Financial Institutions:

N/A

Please list all accounts in your name or for your benefit with banks, savings and loans unions, and credit unions, including checking, savings, certificates of deposit, IRAs, etc., which were closed, sold or otherwise transferred in the past one year period:

Institution name and address: _____

Type of account: _____ Acct #: _____

Date and account balance at closing: _____

Institution name and address: _____

Type of account: _____ Acct #: _____

Date and account balance at closing: _____

Additional? See attached

Safe Deposit Boxes:

N/A

List all safe deposit boxes or other depositories which you have kept or used in the past one year period:

Institution name and address: _____

Name and address of persons with access to box or depository: _____

Contents of box: _____

If surrendered or transferred, date and to whom: _____

Additional? See attached

Set-offs:

N/A

List any of your debts to any creditor, including your bank, that were set off by that creditor against money owned by you during the last 90 days:

Name and address of creditor: _____

Date and amount of each set-off: _____

Additional? See attached

Property of Another:

N/A

List any property that you are holding, managing, or otherwise in control of, including any bank accounts for any person, such as accounts held for children or trusts, and any account belonging to another person on which your name appears:

Name and address of owner: _____

Description of property: _____ Value of property: _____

Location of property: _____

Explain why you are holding or controlling this property: _____

Additional? See attached

Addresses:

N/A

Date on which you moved to your current address: _____

Prior addresses and moving in/out dates within last three years: _____

Spouses and Former Spouses:

N/A

Identify the name of your spouse or any former spouse who resides or resided with you within the last eight year period: _____

Additional? See attached

Environmental Information:

N/A

List any property or facility that you hold which has received a notice by a governmental unit that it may be liable or potentially liable or in violation of an environmental law.

Site name and address: _____

Governmental unit: _____ Date of notice: _____

List any judicial or administrative proceedings under any environmental law to which you were a party:

Name of governmental unit: _____

Case number: _____ Status: _____

BUSINESS INFORMATION

*The following information is required of you **ONLY IF**, during the past six year period, you have been an officer, director, managing partner, or 5% or more stockholder of a corporation, partnership, sole-proprietorship, or self-employed professional.*

Business information:

Name and address of the business: _____

Nature and type of business: _____

Beginning (and ending, if applicable) dates of the business operation: _____

Your percentage ownership of the business: _____

Employer Tax Identification Number: _____

Business Financial Records:

List all bookkeepers and accountants who, within the past two years, have kept or supervised the keeping of your books of accounts and records:

Name and address: _____

Dates services rendered: From _____ to _____

List all firms or individuals who, within the past two years, have audited your books or prepared a financial statement:

Name and address: _____

Dates services rendered: From _____ to _____

List all firms or individuals who are currently in possession of your financial records and books of accounts:

Name and address: _____

Type of records: _____ Are you in possession of these records? Yes , No

Inventories:

List the following information with respect to the last two inventories taken of your property:

Dates, types, and amounts of inventories: _____

Names of supervisors: _____

Names and addresses of persons having possession of the inventories: _____

ASSETS

Include all property of both you and your spouse, if applicable, in which you have an interest even if you are filing alone.

Real Estate:

Parcel #1

Property address: _____

Names of all owners: _____

Present estimated value: _____ Mortgage balances owing: _____

How value was determined (i.e., appraisal, realtor, internet search): _____

Is this property your residence? Yes , No Do you want to keep this property? Yes , No

Parcel #2

Property address: _____

Names of all owners: _____

Present estimated value: _____ Mortgage balances owing: _____

How value was determined (i.e., appraisal, realtor, internet search): _____

Is this property your residence? Yes , No Do you want to keep this property? Yes , No

Additional? See attached

Cash and Money on Deposit:

Amount of cash on hand: _____

Deposits of money with banking institutions:

Name of bank: _____

Type of account: _____ Balance: _____

Name of bank: _____

Type of account: _____ Balance: _____

Additional? See attached

Security Deposits with Landlord, Utilities, Etc.:

Name and address of deposit holder: _____

Balance of deposit: _____ Date deposit will be returned: _____

Name and address of deposit holder: _____

Balance of deposit: _____ Date deposit will be returned: _____

Additional? See attached

OTHER PROPERTY

PLEASE NOTE: When determining the value of the following items of property, use a value which realistically reflects the liquidation value, not the replacement cost. For example, clothing and personal property such as appliances should be given swap meet or garage sale values. Jewelry should be valued at pawn shop values. If you are uncertain of a value, please indicate so. If any item or property is located at a place other than your residence, please indicate so.

Household goods:

Home furniture, furnishings, and appliances: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Electronics: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Books, pictures, art, and collectibles: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Personal effects:

Clothing and apparel: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Jewelry: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Furs: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Firearms: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Equipment for sports and hobbies: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Any other personal or household items not already listed: Total resale value: _____
Any single item worth more than \$500? Describe: _____

Vehicles:

Vehicle #1

Make: _____ Model: _____ Year: _____ Mileage: _____
Condition: _____

Vehicle #2

Make: _____ Model: _____ Year: _____ Mileage: _____
Condition: _____

Vehicle #3

Make: _____ Model: _____ Year: _____ Mileage: _____
Condition: _____

Miscellaneous Property (provide description and value):

Pets: _____

Boats: _____

Livestock: _____

Farming Equipment: _____

Interest in a business: _____

Office equipment: _____

Machinery, fixtures: _____

Inventory (attach list): _____

Insurance policies: _____

Annuities policy: _____

Retirement interests (provide plan name, depository or administrator, present value – attach most recent statement of account):

Pension and Profit Sharing Plans: _____

401(k) Plans: _____

Employee Stock Purchase Plans: _____

IRA: _____

Tuition Plan (529 Plan): _____

Patents, copyrights: _____

Mutual funds, government and corporate bonds: _____

Claims for income tax refunds: _____

Other money owing to you including accounts receivable: _____

Contingent/unliquidated claims: _____

Stock and company interests: _____

Interests in partnerships and joint ventures: _____

Licenses or franchises: _____

Customer lists or similar compilations: _____

Equitable and future interests: _____

Personal injury claims: _____

Child or spousal support to which you may be entitled: _____

Interest in a probate proceeding, life insurance policy, or trust: _____

Interest in property outside the US: _____

Any other property not previously mentioned: _____

PLEASE NOTE: If you are self-employed, an independent contractor, or have an interest in an unincorporated business, be sure that you listed all of the business assets above, including, but not limited to, furniture, furnishings, equipment, machinery, accounts receivable (including open escrows), inventory, patent rights, and other assets of the business. If necessary, attach additional pages.

DEBTS

Please indicate the following information with respect to each possible creditor. Include all debts, even debts of others you have guaranteed, and contingent claims that you may become obligated for in the future. Unless you indicate otherwise, it will be assumed that all the debts are joint debts if you are a married couple. Please indicate whether the claim is disputed, not fixed as to amount (unliquidated), or contingent and whether someone else is liable with you, and if so, that person's name and address. All additional information, including anything else of which you think we should be aware, or questions which you may have concerning a particular debt should be indicated in the margin next to the listing of the debt. **ALL DEBTS AND POSSIBLE LIABILITIES SHOULD BE LISTED ON THIS FORM OR AN ATTACHED SHEET OF PAPER.**

Debts Owed to the Government:

TAXES

Taxing agency: _____ Tax period/year: _____

Tax type (i.e., income, payroll, etc): _____ Amount due: _____

Was the return filed on time? Yes , No Has a tax lien been recorded? Yes , No

Taxing agency: _____ Tax period/year: _____

Tax type (i.e., income, payroll, etc): _____ Amount due: _____

Was the return filed on time? Yes , No Has a tax lien been recorded? Yes , No

Taxing agency: _____ Tax period/year: _____

Tax type (i.e., income, payroll, etc): _____ Amount due: _____

Was the return filed on time? Yes , No Has a tax lien been recorded? Yes , No

OTHER

Government agency: _____ Date debt incurred: _____

Nature of debt: _____ Amount due: _____

Government agency: _____ Date debt incurred: _____

Nature of debt: _____ Amount due: _____

Additional? See attached

Real Estate Loans:

Name of 1st Trust Deed Holder: _____

Address: _____

Current loan balance: _____ Monthly payment: _____

Date of loan: _____ Loan #: _____ Int rate: _____

Name of 2nd Trust Deed Holder: _____

Address: _____

Current loan balance: _____ Monthly payment: _____

Date of loan: _____ Loan #: _____ Int rate: _____

Property Taxes: Are any taxes past due? Yes , No If yes, amount? _____

Auto Loans and Leases:

Vehicle # 1 – Purchase or Lease

Make: _____ Model: _____ Year: _____

Lender name: _____

Address: _____

Account number: _____ Amount of Arrears: _____

Current balance: _____ Monthly payment: _____

Interest rate: _____ Date of loan: _____ Term (years): _____

Do you want to keep the car after the bankruptcy? Yes , No

Vehicle # 2 – Purchase or Lease

Make: _____ Model: _____ Year: _____

Lender name: _____

Address: _____

Account number: _____ Amount of Arrears: _____

Current balance: _____ Monthly payment: _____

Interest rate: _____ Date of loan: _____ Term (years): _____

Do you want to keep the car after the bankruptcy? Yes , No

Vehicle # 3 – Purchase or Lease

Make: _____ Model: _____ Year: _____

Lender name: _____

Address: _____

Account number: _____ Amount of Arrears: _____

Current balance: _____ Monthly payment: _____

Interest rate: _____ Date of loan: _____ Term (years): _____

Do you want to keep the car after the bankruptcy? Yes , No

UNSECURED DEBTS

PLEASE NOTE: Unsecured debts include credit cards, payday loans, personal loans, student loans, debts owing to other persons, etc. The easiest way to find all of your debts is to pull a credit report from www.annualcreditreport.com and attach it to this form. Any debts not listed on your credit report can be listed on a separate attachment to this form. Make sure that your credit report contains the following information for each debt:

- Name of creditor;
- Address of creditor;
- Account number;
- Amount owing;
- Date or period over which debt was incurred;
- Basis or purpose of debt (e.g., credit card, dental services, collections, etc.); and
- Any other information that you think could be relevant

EMPLOYMENT

Current employer: _____ Position: _____

Address: _____ Date hired: _____

Spouse's current employer: _____ Position: _____

Address: _____ Date hired: _____

BUDGET

THESE QUESTIONS SHOULD BE ANSWERED FOR BOTH SPOUSES IF LIVING TOGETHER, EVEN IF ONLY ONE SPOUSE IS FILING.

Dependents:

(regardless of whether they are claimed on taxes)

Name	Age	Relationship

Average Monthly Income

	Self	Spouse
Gross Pay (wages, salary, commissions) per paycheck		
How often paid (weekly, bi-weekly, monthly, etc)		
Payroll deductions:		
• Tax, medicare, social security		
• Mandatory contributions to retirement plans		
• Voluntary contributions to retirement plans		
• Required repayments of retirement fund loans		
• Insurance		

• Domestic support obligations		
• Union dues		
• Other deductions (specify)		
Net income from operating a business		
Net income from rental property		
Interest and dividends		
Child/spousal support income		
Unemployment compensation		
Social Security payments		
Other Government assistance income		
Pension or retirement income		

Do you anticipate any changes in your income over the next 14 months? If yes, explain:

Average Monthly Expenses

Rent/Mortgage payment	
• Property taxes	
• Homeowner's or renter's insurance	
• Maintenance, repair, upkeep expenses	
• HOA dues	
Additional mortgage payments	
Utilities	
• Electricity, heat, gas	
• Water, sewer, garbage collection	
• Telephone, cell phone, internet, satellite, and cable services	
• Other utilities (specify)	
Food and housekeeping supplies	
Childcare and children's education costs	
Clothing, laundry, and dry cleaning	
Personal care products and services	
Medical and dental expenses (<i>not insurance</i>)	
Transportation (<i>gas, repairs, etc, not loan/lease payments</i>)	
Entertainment, clubs, recreation, newspapers, magazines, and books	
Charitable contributions and religious donations	
Insurance	
• Life insurance	
• Health insurance	
• Vehicle insurance	
• Other insurance (specify)	

Taxes (do not include taxes deducted from your paycheck)	
Car payment for Vehicle 1	
Car payment for Vehicle 2	
Other loan payment (specify)	
Other loan payment (specify)	
Child/spousal support payments not deducted from paycheck	
Support payments that are not court ordered	

Do you anticipate any changes in your expenses over the next 14 months? If yes, explain:

PLEASE BE SURE YOU HAVE ATTACHED COPIES OF THE FOLLOWING

1. Proof of income for you and your spouse, **month-by-month for the last 6 months**. This would include paystubs and/or income & expense statements;
2. Most recent correspondence from a taxing agency you owe money to;
3. Court orders for child/spousal support;
4. Statements for retirement benefits, annuities, or educational trusts;
5. Pleading papers showing location of court, case number, and other parties names and attorneys for all lawsuits in which you are a party;
6. Any Notice of Default or Notice of Trustee's Sale for any pending foreclosures;
7. Abstracts of Judgment.

I/we have reviewed the foregoing information, and to the best of my/our knowledge and belief, it is complete and correct.

Dated: _____ Debtor: _____

Dated: _____ Spouse: _____