



**JORDAN
LAW
FIRM, LLC**

FOR OFFICE USE ONLY: Credit Counseling Agency used: _____ Chapter: _____

Fee: _____

Name _____ Joint Debtor _____

Address _____

Mailing _____

Social Sec. # _____ Social Sec. # _____

Cell # _____ Cell # _____

EMAIL _____ EMAIL: _____

Other Names Used _____ Other Names Used _____

Prior Bankruptcy? Yes No (Circle correct answer) If yes, give year filed: _____

What chapter was filed? _____

Schedule A: Real Estate

Own/Buying Home _____ Fair Market Value _____ Balance _____

Arrears _____ Mortgage Holder _____ Mo. Mtg. Payment \$ _____

Renting _____ Monthly Rent payment \$ _____ Arrears \$ _____

Schedule B: Personal Property

Bank Accounts: (Circle One) Checking Savings Both With Whom? _____

How much money is in the account: _____

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How much money is in the account: _____



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Fair Market Value Of?

Furniture: \$ _____ Clothing: \$ _____

Guns: \$ _____ Jewelry: \$ _____

Any inheritance expedited? _____

Vehicles:

Fair Market Value: \$ _____ Balance: \$ _____ Make/Model _____

Model Year _____

Lien Holder _____

Will you keep this car? _____ Are you behind on payments:

Fair Market Value: \$ _____ Balance: \$ _____ Make/Model _____

Model Year _____

Lien Holder _____

Will you keep this car? _____ Are you behind on payments:

Fair Market Value: \$ _____ Balance: \$ _____ Make/Model _____

Model Year _____

Lien Holder _____

Will you keep this car? _____ Are you behind on payments:

Schedule I: Income

Single	Married	Separated	Divorced
Children	yes no		
Name: _____		Relationship _____	Age: _____
Name: _____		Relationship _____	Age: _____
Name: _____		Relationship _____	Age: _____
Name: _____		Relationship _____	Age: _____



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Occupation: _____

Employer: _____

Address: _____

Age: _____

Age: _____

How long employed? _____

How long employed? _____

Pay Period: Weekly Bi-weekly Monthly

Pay Period: Weekly Bi-Weekly Monthly

Gross: \$ _____

Gross: \$ _____

Net Income: \$ _____

Net Income: \$ _____

SSI/Gov. Assistance \$ _____

SSI/Gov. Assistance \$ _____

Child support \$ _____

Child Support \$ _____

Other Income \$ _____

Other Income \$ _____

Statement of Financial Affairs

Payments to Creditors for more than \$600.00:

Are you suing anyone or do you have a claim against someone? _____

Have you sold property to anyone in the last 4 years? _____

Are you court ordered to pay child support or alimony to anyone? _____

Do you have any property that has been reposed or foreclosed?: _____

Have you filed your federal taxes for the last 4 years: _____

Have you informed me of all of your income and is it listed on this page? _____

Are you expecting any inheritance or are you named in an open estate?: _____

Do you have any judgments against you from a past creditor?: _____

Informed Consent

I, _____ have read the contents of this questionnaire and the contents are true and accurate to the best of my ability.

Signature

Signature



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Monthly Budget:

1. Rent or mortgage payment: _____
2. Electric Bill: _____
3. Gas bill: _____
4. Water Bill: _____
5. Groceries for the month: _____
6. Cable: _____
7. House Phone: _____
8. Cell Phone: _____
9. Internet: _____
10. Car Insurance:
11. Car Payment (1): _____
12. Car Payment (2): _____
13. Car Repairs: _____
14. Car Insurance: _____
15. Clothes: _____
16. Personal Items: _____
17. Child Support or Alimony Payments that you make to someone else: _____
18. Medical expenses per month: _____
19. Dental expenses per month: _____
20. Tuition payments: _____
21. Daycare Payments: _____
22. Other: _____
23. Other: _____
24. Other: _____
25. Other: _____
26. Other: _____
27. Other: _____
28. Other: _____
29. Other: _____



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30. Other: _____

ONLY IF have any payday loans, title loans or other creditors that don't report to the credit report agencies list that creditor's full name and address below.

Creditors Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Creditors Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Creditors Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Creditors Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Creditors Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____