



Law Offices of Charles L. Basch II

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CALL AND SCHEDULE AN APPOINTMENT 877-343-9930

I/we are looking to file bankruptcy and would like to file a
(circle one) Chapter 7 to eliminate our debt or Chapter 13 to
re-organize our debt to save our property.

Name: _____

First Middle Last
SOCIAL SECURITY NUMBER _ _ _ - _ _ _ - _ _ _ _

Name of Spouse: _____

First Middle Last
SOCIAL SECURITY NUMBER _ _ _ - _ _ _ - _ _ _ _

Any Other Names Used in the Last Six (6) years, if so list Below

Any Business that You Have Owned or Operated, if so List Below

TELEPHONE NUMBER _____ EMAIL _____

CURRENT ADDRESS/ REAL PROPERTY

Street Number and Name: _____
City, State, and Zip Code: _____

*Mailing Address if Different

Name of Mortgage Company: _____
Second Mortgage Company: _____
Balance Owed: \$ _____
SEV/VALUE: \$ _____

Escrowed: Y or N ARREARS: \$ _____
Taxes _____ Water _____

DO YOU OWN THE HOUSE LISTED ABOVE: Yes or No
DO YOU OWN ANY OTHER HOUSES? Yes or No
HAVE YOU OWNED ANY OTHER HOUSES IN THE LAST 6 YEARS? Yes or No

CARS AND OTHER VEHICLES

Year _____	Make _____	Model _____	Creditor _____	Balance _____	Payment _____
Year _____	Make _____	Model _____	Creditor _____	Balance _____	Payment _____
Year _____	Make _____	Model _____	Creditor _____	Balance _____	Payment _____
Year _____	Make _____	Model _____	Creditor _____	Balance _____	Payment _____

PERSONAL PROPERTY

Checking and Savings Accounts (even if there is no balance or you are on someone else's account)

*for the following estimate the value at garage sale prices.

Inside the House

Household furnishings, (couches, tables, chairs, beds, tv's, computers, plates, pots, pans and the like) \$ _____

Clothing \$ _____

Books, Pictures, Art Objects, Collectables \$ _____
Hobby Equipment and Sporting Goods \$ _____
Furs and Jewelry (pawn shop prices) \$ _____

Other Personal Property
* actual value

Life Insurance Policies either through work or private
\$ _____
Annuities \$ _____
CD's or Bank Notes \$ _____
IRA's \$ _____

Pensions \$ _____
401k, 403b or the like \$ _____
Stocks \$ _____
Bonds \$ _____

Interests in any businesses, partnerships or other ventures
\$ _____

Tax Refunds you Anticipate \$ _____
Alimony or Maintenance Owed \$ _____

Any lawsuits or claims against anybody? _____

Current Income and Support

Are you: Married, Divorced, Separated, Widowed or Single

Debtor's Employer _____
Debtor's Occupation _____
Employer's Address _____

How long have you worked there _____ years/months

Hourly Rate of Pay \$ _____ Is overtime available?
Or Yearly Salary \$ _____ Frequency of Pay _____

Deductions, please provide a pay stub.

Joint Debtor's Employer _____

Joint Debtor's Occupation _____

Employer's Address _____

How long have you worked there _____ years/months

Hourly Rate of Pay \$ _____ Is overtime available?

Or Yearly Salary \$ _____ Frequency of Pay _____

Deductions, please provide a pay stub

How Many People Live in Your House? _____

MONTHLY EXPENSES

The following questions ask for your expenses each month. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.), write in the amount and the frequency that you pay the amount.

Indicate how much you pay for each item each month...

1. your rent or your home mortgage \$ _____
Does that amount include real estate taxes? No Yes
Does it include property insurance? No Yes
2. electricity and heating \$ _____
3. water and sewage \$ _____
4. telephone service/long distance \$ _____

5. Do you have any other utility bills? If so, what, and how much per month?
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
6. home maintenance, including repairs and general upkeep \$ _____
7. food \$ _____
8. clothing \$ _____
9. laundry and dry cleaning \$ _____
10. medical and dental expenses \$ _____
11. transportation (not including car payments) \$ _____
12. entertainment, recreation, newspapers, magazines \$ _____
13. charitable contributions \$ _____
14. insurance not deducted from paycheck
- a) homeowner's or renter's insurance \$ _____
- b) life insurance \$ _____
- c) health insurance \$ _____
- d) auto insurance \$ _____
- e) other insurance _____ \$ _____
15. taxes not deducted from paycheck \$ _____
16. installment payments for car, furniture, etc. (Specify)
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
17. alimony, maintenance, support paid to others \$ _____
18. payments for support of dependents not living at home \$ _____
19. expenses from operation of business \$ _____

FINANCIAL QUESTIONS AND SITUATION

Year to Date: Debtor _____ Spouse _____

Last Year: Debtor _____ Spouse _____

Year Before: Debtor _____ Spouse _____

Any income from Social Security or Child Support _____

Have you ever filed bankruptcy before? _____

Have you ever had a car repossessed or a home foreclosed on before?

Is or has anyone sued you in the last two years for any reason or have you filed any lawsuits against anyone?

Are you or have you recently leased any thing from anyone?

List complete addresses of any place you have lived within the last two years

Briefly Describe What Brought You To This Point.

on a separate sheet list the name, address and account number and amount owed for every creditor that you have including utilities and any friends or relatives.

For More Information Schedule an In-depth Free Consultation with Attorney Charles L. Basch II at 877-343-9930 or debtfreedetroit@gmail.com