#### ANN U. BELL, ATTORNEY AT LAW

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Debtor 1:					
Debtor 2:					
Date:					
Chapter:	7	13	NBK	None	
Fees:		+			
Payment over pla	an:				
Notes:					

# We are a federally designated debt relief agency pursuant to Title 11 of the U.S. Code, to help people file bankruptcy.

Projections are based on information provided. The fee quoted is determined by the amount of work we anticipate based on the information you provided today. Additions to the information provided by you could result in an adjustment of attorney's fees and/or the projected payment to the Trustee. This would be determined at the time the attorney is retained or shortly thereafter.

If you file a Chapter 13, no guarantee is made that the Court will confirm this plan or that the plan will prove affordable. It is represented that this type plan and the resulting treatment afforded by your creditors, has been confirmed in numerous cases handled by this attorney and if payments are made, there would be a retention of everything sought to be retained by you.

The Court may, after examining your monthly income and expenses, determine that your payment should extend for more months, or at a higher amount monthly. Client will be advised if changes from the above are made. Attorney will render best efforts to have a plan, such as the one projected here, confirmed by the Court. A plan cannot exceed 60 months.

I hope you will appreciate the efforts of this office to place as much into writing as possible. This avoids most misunderstandings and allows you and me to concentrate on our respective responsibilities – you to pay your creditors as proposed and me to make best efforts to get your plan confirmed by the Court.

I enjoyed meeting with you. If you have any questions, do not hesitate to get back in touch with me.

## ANN U. BELL, ATTORNEY AT LAW Ann U. Bell Email: ann@annbelllaw.com

## DATE:

You are going to be meeting with a bankruptcy attorney shortly. You will not be pressured to make any decisions at this time. Our policy is to treat this meeting as one that will enable you to better understand your options.

PLEASE ANSWER THE	FOLLOWING: If unmarried, s	simply omit reference to your spouse.
Your <u>full</u> name		_ Date of Birth/
Your spouse's <u>full</u> name		_ Date of Birth//
Do your creditors know you	u by another name? Yes No	• Name
Social Security Number		Names and ages of dependants:
Spouse's Social Security N	umber	
Your mailing address (with zip code)		What county do you live in?
Phone numbers: (if none, please indicate)	HOME WORK (yourself) WORK (spouse)	
Have you been living in So	t your case and the law via email	<b>YES</b> NO $-$ If not, where did
	OU HEAR ABOUT US? (Plea	
Other Attorney	Radio	Television
Client/Friend	Yellow Pages	Newspaper
Consumer Credit Counselin	ng Internet	

## **INCOME**

This includes social security, unemployment, retirement, disability, and withdrawals from retirement plans or 401Ks YOUR Employment:

Place	Take Home Pa	ay \$ Pe	r: wk/2 wks/2X month/month
Do you make contributions to a Are contributions mandatory? Y Do you owe any money for a loa	les No		
YOUR SPOUSE'S Employmen	<u>t</u> :		
Place	Take Home Pa	ay \$ Pe	r: wk/2 wks/2X month/month
Do you make contributions to a Are contributions mandatory? Y Do you owe any money for a loa	les No		
Please list all other sources of	income:		
Military Retirement		Food Stamps	\$
Other Retirement	\$	VA Education	\$
Social Security	\$	Unemploymen	t \$
Child Support and/or Ali	mony \$	Other income	\$
Provide details of any bonuses y	rou have gotten in t	he last year, or t	hat you might receive:
Do you pay or owe child suppor Do you owe any property taxes? Has your property been sold by In the last year, have you receive late? Yes No	Yes No the county for unpa ed a notice from th	aid taxes? e tax collector th	Yes No
If you answer "yes" to any o	ACCOUNT E f the below questio		will discuss these with you.
Have you paid off any debts/acc Have you made any payments he Yes No Have you paid off or made paym year? Yes No When was the last time you used	ounts in the last ye igher than \$600 to nents towards any o	ar? Yes any creditor in t lebts <i>owed to</i> fat	No he last six months?

# **VEHICLES**

These questions apply if you **own** or are **paying on** a vehicle.

I.		ty for a loan?			<b>s holding title to the</b> k a loan against the title,
VEHICL	LE #1				
<u>Creditor</u>	<u>Year, Model</u>	Monthly <u>Payment</u>	Are you <u>Current?</u> Yes No	Day of <u>Month Due</u>	11
What more Loan was	nth and year did yo s for M	u make the firs ONTHS	st payment? Payoff on lo	an \$	
VEHICL	LE #2				
Creditor	<u>Year, Model</u>	Monthly <u>Payment</u>	Are you <u>Current?</u> Yes No	Day of <u>Month Due</u>	
What more Loan was	nth and year did yo s for M	u make the firs ONTHS	st payment? Payoff on lo	an \$	
II.	Do you own a ve	hicle that is <u>p</u>	<u>aid for</u> with n	o creditor hold	ling title?
IF YES:	Year, Model	Milea	uge <u>Valu</u>	<u>e</u> <u>Title</u>	in name of
1.					

- 2.
- 3.

#### **MISCELLANEOUS INFORMATION**

Do you have a checking, savings, or other account with any bank, savings and loan association, or credit union? Yes No In what bank(s)?

Do you anticipate, or have you already received, a tax refund for the most recent tax year?

If yes, how much did you receive: IRS \_\_\_\_\_ State \_\_\_\_\_ Yes No Have you filed all required tax returns in the past 4 years? Yes No Do you owe taxes? Yes No

If you have been divorced or separated, did a family court order you to assume responsibility for When? marital debts incurred during that marriage? Yes No

Have any of your debts been cosigned or guaranteed by someone other than your current spouse? If yes, please provide name(s) of cosigner(s) and creditor(s) Yes No

Do you own any of the following?

	Stocks?		No ted State	es Savings Bon	de? Va	s No		
	Animals or pe	-		-		5 110		
	1				Va	lue \$	_	
	Boats? Yes							
	Books, prints,	picture	s, stamp	s, coins, or spo	rts equipm	ent of value?	Yes	
	IRA/401K/oth	er retire	ement?	Yes No	If yes, amo	ount in account \$		
	Tools? Yes	No	Please	give a general	description			
Does a	nyone owe you	any m	oney yo	u think you car	n collect?			
•	a have any pend describe:	•		0 0		odily injuries?	Yes	No
Have y		vith any	attorne	y about any oth	er matter v	vithin the last yea	r? Yes	No
Other 1		s, do yo	u own a	nything this fo	rm did not	address? Yes	No	
Have y	ou transferred	any ass	ets to fr	iends or family	members i	n the last 12 mon		s No
Have y		ankrupt	cy befo	re? Yes	No If y	ves, what state did		e in,

# <u>HOUSE</u> If you own a house, please answer these questions. If not, leave blank.

# WHERE IS HOUSE LOCATED?

Street Address (include city/					
County					
PURCHASE	COF HOUSE (use be	st guess – plea	use tell us if you	are guessing)	
DATE PURC	CHASED:	HOW IS	HOUSE TITLE	D?	
VALUE OF I	HOUSE – Estimate pr	esent value \$			
MORTGAG	E PAYMENTS: Ple	ase list all mor	tgage holders, li	sting first mortg	age holder first.
1 <sup>st</sup> Mortgage 2 <sup>nd</sup> Mortgage 3 <sup>rd</sup> Mortgage	Name of <u>Mortgage Holder</u>	Monthly <u>Payment</u>	Current? (Yes – No)	If you are not current, what month do you	Best estimate
Do your mort	gage payments includ	le: Escr	row Taxes	s Insurat	nce

# **OTHER REAL ESTATE OWNED** If you own other real estate, please answer these questions.

Describe and give the location of all other real estate (lot, building/house, land, or burial plot) in which you hold an interest:

How is property title				
Purchase price \$		Year	· purchased	
Outstanding mortgag	ge balance(s) (	(if any):		
Present value of the				
If you own a	a mobile hom	<u>MOBILE</u> e, please answe		ions. If not, leave blank.
Is this your residenc	e? Yes	No		
IN WHOSE NAME	IS MOBILE	HOME TITLEI	D?	
VALUE OF MOBII	LE HOME – E	stimate present	value \$	
Do you plan to KEE	P or SURREN	IDER the mobi	le home? (circ	cle one)
If you do not live in If yes, how much?				? Yes No
LOAN PAYMENT	S: Please list	all lienholders	and informatio	on requested.
Name of <u>Lienholder</u>	Monthly <u>Payment</u>	Current? (Yes-No)	Months <u>Behind</u>	Best Estimate of Payoff Balance
1 <sup>st</sup> Lien				
		ANCE INCLUI		
2 <sup>nd</sup> Lien				

Please convert ALL expenses to what you spend on them MONTHLY   EXPENSE HOW OFTEN				
EXPENSE	HOW OFTEN DO YOU PAY THIS?	AMOUNT	NOTES	
Mortgage or mobile home payment			Include all mortgages in this figure	
Rent				
Lot rent				
Property taxes			If mtg doesn't pay	
Property insurance			If mtg doesn't pay	
Property maintenance (repairs & upkeep)				
Electricity (& heating fuel)				
Water, sewer, trash				
Telephone (include cell)				
Cable				
Groceries, food, lunch money, etc.				
Child care or tuition				
Medical insurance			Taken out of pay?	
Medical & dental (visits, prescriptions, etc.)			Monthly average out of pocket	
Alimony, child support, court- ordered payments				
Auto/truck payments (total)				
Auto maintenance				
Auto insurance				
Auto taxes				
Auto gas or other transportation costs				
Life insurance				
Clothing				
Laundry/dry cleaning				
Entertainment, newspaper, etc.				
Charitable contributions (church,				
etc.)				
Union/club dues				
Hair cuts				
Emergency fund, gifts, misc.				

#### **MONTHLY BUDGET** Please convert ALL expenses to what you spend on them MONTHLY

## PLEASE LIST EACH CREDITOR YOU OWE AND HOW MUCH YOU OWE TO EACH ONE, EVEN IF YOU THINK IT IS SOMEONE WHO SHOULD NOT BE INCLUDED IN THE BANKRUPTCY

REDITOR NAME	BALANCE OWED	COLLATERAL

#### PLEASE LIST ANY DEBTS COSIGNED BY SOMEONE ELSE. PLEASE ALSO BE SURE THAT ALL CREDITORS LISTED ELSEWHERE IN THIS PACKAGE ALSO APPEAR ON THIS LIST.