

CRAIG W. ANDRESEN, ATTORNEY AT LAW  
2001 KILLEBREW DRIVE, STE. 150  
BLOOMINGTON, MN 55425  
(952) 831-1995 Telephone, (952) 854-4114 Fax  
*www.andresenlaw.com*

CLIENT WORKSHEET  
BANKRUPTCY, CHAPTER 7 AND CHAPTER 13

**INSTRUCTIONS:** At Andresen Law Offices, we're experts at helping people decide whether to file bankruptcy, and at helping assemble the required papers. Please supply the following information and then call us to set up a meeting. *It is important that this worksheet is filled out completely. Please call our office if you have any questions -- we'll be happy to help you.*

If you are married, please answer the questions for both you and your spouse.

1. **FULL NAME, DATE OF BIRTH, & AGE**, and any other names you have used in the last six years (maiden name, business name, etc.):

2. Home and cell phone numbers:

3. Email address:

4. Social security number:

5. Current address and **county**:

6. Any other addresses in the last three years:

7. Names of your dependent children and ages:

8. Your occupation:

9. Name, address and TELEPHONE NUMBER of your employer, and the length of time you have worked there:

10. Name and telephone number of your nearest friend or relative who might be able to take messages for you:

11. Have you been in business with anyone, or by yourself independently in the past six years? If so, write down the business' name, its location and dates of operation.

12. Income during each of the past **two** calendar years, and your income so far this year:

a. This Year:

b. Last Year:

c. Two Years Ago:

13. List the amount of income from any source other than wages during each of the last two calendar years.

14. How much did you receive in tax refunds last year?

15. Savings or checking accounts: name of the bank, type of account, and the amount on deposit. Include all accounts in the last 12 months, whether open or closed, even if there is a zero balance.

16. Safe deposit boxes you have used in the last two years:

17. If you have ever filed bankruptcy before, list the location of the court in which you filed the case. State which chapter the case was, the approximate date it was filed, and how the case resulted.

18. Has anyone garnished your wages, repossessed any of your property (voluntarily or involuntarily), or taken any similar action against you, in the last year? If so, give the name of the creditor and the property taken.

19. Name of any creditor who has sued you in the last one year:

20. Have you borrowed money from and paid back any friends or family members within the past year? If so, please list the amounts borrowed and paid back.

21. Please list all your debts (creditors) on a separate sheet(s) of paper. Include the following information **in this format:**

- (a) Name of the creditor;
- (b) Address;
- (c) What the debt is for (charge card, taxes, car loan, etc.);
- (d) Is there any collateral for the debt? If so, list each item of collateral for the debt and give its current value;
- (e) The total balance still owing on the debt; and
- (f) The name, address and relationship to you of any cosigner. (Cosigners are normally protected.)

“Creditor” includes any person, firm or entity (1) that you owe money to now, or (2) that you might owe money to based on some past event. Although you can arrange to keep some of your debts if you desire, list **all** creditors, including relatives. Be sure you provide the name and address of the original creditor, as well as any collection agency or attorney, to ensure that the creditor receives notice of this case. Failure to do so results in the debt not being discharged, and may have other consequences.

If you can't find some of the information, don't worry. We will discuss that later. Be assured that in most cases you will not be giving up any property or possessions, and cosigners will not be affected.

22. Please make a list of all your assets. "Assets" means all the things commonly considered assets, such as money, bank accounts, cars, real estate, clothes and furniture. It also includes things not commonly considered assets, such as life insurance policies, security deposits, pension rights, debts owed to you, or claims you might have against another person for property damage or personal injury. If you have any such claims, list them below so they can be protected. List the **fair market value** for each asset, which is the **value you could get if you tried to sell the item, not replacement value.**

**YOU WILL NOT NORMALLY LOSE, OR HAVE TO SELL, ANYTHING AS PART OF YOUR CASE, UNLESS WE TELL YOU THAT BEFORE YOUR CASE IS FILED.**

Motor vehicle yr & type _____ value \$ _____	(Home, cabin or other real estate (_____ market value \$ _____)
Motor vehicle yr & type _____ value \$ _____	<b>(Legal description, including county and state:</b> (example: Lot 1, Block 2, (Jones's Addition, etc.)
Motor vehicle yr & type _____ value \$ _____	( ( (_____
Clothing \$ _____	
Jewelry \$ _____	Life insurance (cash/loan value) \$ _____
Bank account - #1 \$ _____ - #2 \$ _____ - #3 \$ _____	Household goods/supplies/ furnishings \$ _____
Tax refunds you are expecting	Security/damage deposit \$ _____
Federal - IRS \$ _____	Computer, printer, laptop \$ _____
State - MN \$ _____	Firearms \$ _____
Other - \$ _____	Recreational equipment \$ _____
Rent Credit \$ _____	Lawnmower, snowblower, and other machinery \$ _____
Homestead Credit \$ _____	Tools \$ _____
Debts owed to you \$ _____ (describe)	Pension, profit sharing, or retirement account \$ _____
Boats, trailers, etc. \$ _____	Expected lawsuit settlements \$ _____ (car accident, workers comp, etc.)
Interests in Land \$ _____ or Timeshare	Television \$ _____
Expected Inheritance \$ _____ Funds	Stereo, CD player \$ _____
Cell phone, tablet \$ _____	
Other Assets \$ _____ (describe)	

23. Please state which pay period:  
(weekly, biweekly, semimonthly, monthly)

Husband

Wife

Gross pay per pay period

Taxes withheld (fed., state, FICA)

Other deductions (describe)

Net per pay period

Alimony/child support you receive, **monthly**

Any other payments you receive,  
**monthly** (describe)

Net **monthly** household income \$\_\_\_\_\_

24. Please list your monthly budget including all your living expenses. Include everything you normally spend. Do not include payments on past debts except where indicated.

Rent/mortgage payment \$\_\_\_\_\_

Home repairs \$\_\_\_\_\_

Car Payment - #1 \$\_\_\_\_\_

Medical/drug expenses \$\_\_\_\_\_

Car payment - #2 \$\_\_\_\_\_

Union dues or taxes not withheld from wages \$\_\_\_\_\_

Other installment payments \$\_\_\_\_\_

Club memberships \$\_\_\_\_\_

Student Loans \$\_\_\_\_\_

Entertainment, Newspapers/books/magazines \$\_\_\_\_\_

Food \$\_\_\_\_\_

Clothing \$\_\_\_\_\_

Alimony/child support \$\_\_\_\_\_

Utilities:

Heat \$\_\_\_\_\_ Cell Phone \$\_\_\_\_\_

Electricity \$\_\_\_\_\_ Garbage \$\_\_\_\_\_

Phone \$\_\_\_\_\_ Cable TV \$\_\_\_\_\_

Water \$\_\_\_\_\_ Internet \$\_\_\_\_\_

Insurance: Auto \$\_\_\_\_\_

Renter/Homeowners \$\_\_\_\_\_

Other Ins. (not deducted from wages):

Health \$\_\_\_\_\_

Disability \$\_\_\_\_\_

Life \$\_\_\_\_\_

Laundry/dry cleaning \$\_\_\_\_\_

Pet Expenses \$\_\_\_\_\_

Daycare \$\_\_\_\_\_

Transportation: (monthly car repairs, gas, parking, bus) \$\_\_\_\_\_

Children's Activities (school/sports/music) \$\_\_\_\_\_

I (we) hereby attest that the above information is true, correct and complete to the best of my (our) knowledge and belief.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

<b>Name of Creditor</b>	<b>Address of creditor, collection agency or attorney</b>	<b>Type of Debt (secured, unsecured, mtg)</b>	<b>Amount Owed</b>