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Retainer Fees:  
Chapter 7: \$450.00  
Chapter 13: \$970.00

### INFORMATION REQUIRED FOR CHAPTER 7 OR 13 FILING

1. Complete name(s) and any other name or business name used in the past six years.

(Client) \_\_\_\_\_ Social Security # \_\_\_\_\_

(Spouse) \_\_\_\_\_ Social Security # \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_

Referred by \_\_\_\_\_

2. E-Mail address: \_\_\_\_\_

3. Addresses for the past two years:

Present (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Former (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

4. All phone numbers (home, work, pager, etc.) where you can be reached.

(Client) \_\_\_\_\_  
(Cell) \_\_\_\_\_ (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

(Spouse) \_\_\_\_\_  
(Cell) \_\_\_\_\_ (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

5. Place of employment; how long; position:

(Client) \_\_\_\_\_  
(Company) \_\_\_\_\_ (Address) \_\_\_\_\_ (Position) \_\_\_\_\_ (Years) \_\_\_\_\_

(Spouse) \_\_\_\_\_  
(Company) \_\_\_\_\_ (Address) \_\_\_\_\_ (Position) \_\_\_\_\_ (Years) \_\_\_\_\_

6. Please provide your last two years tax returns and fill in annual income information below:

2 years ago \_\_\_\_\_

Last year \_\_\_\_\_

Current year \_\_\_\_\_ (year to date)

7. Have you received any income other than wages in the past two years such as child support, alimony,

unemployment compensation, disability compensation or legal settlements? If yes, please state source and total amount: \_\_\_\_\_

2 years ago \_\_\_\_\_ source \_\_\_\_\_

Last year \_\_\_\_\_ source \_\_\_\_\_

Current year \_\_\_\_\_ source \_\_\_\_\_

8. List of assets and estimated market value ( based on amount for which item could be sold at a garage sale, for example: sofa and love seat, \$150.00)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Amount and type of taxes due (if any). \_\_\_\_\_

10. Monthly Income: Client: Gross \_\_\_\_\_ Net \_\_\_\_\_

Spouse: Gross \_\_\_\_\_ Net \_\_\_\_\_

11. Usual monthly expenses

Rent/Mortgage:	Home Maintenance:
Real Estate Taxes if not escrowed:	Food:
Property Insurance if not escrowed:	Clothing:
Electricity:	Laundry/Dry Cleaning:
Water/Sewer:	Medical/Dental Expenses:
Home Phone:	Gas/Car Repairs:
Cell Phones:	Recreation/Entertainment:
Cable:	Charity/Tithing:
Internet:	Child Support paid:
Other Insurance not deducted from paycheck: Life – Health – Auto –	
Child Care:	Education Cost/Supplies:
Alarm	Other:

**PLEASE PROVIDE COPIES OF THE FOLLOWING DOCUMENTS.  
 WE WILL NOT BE RESPONSIBLE FOR ORIGINAL DOCUMENTS LEFT IN THIS OFFICE  
 VALID DRIVERS LICENSE \*\*\* SOCIAL SECURITY CARD  
 COPY OF PROOF OF VEHICLE INSURANCE \*\*\* COPY OF 6 MONTHS BANK STATEMENTS  
 COPY OF MOST RECENT 7 MONTHS PAYSTUBS \*\*\* COPY OF 2 YEARS TAX RETURNS  
 Get a Free Credit Report at: [www.annualcreditreport.com](http://www.annualcreditreport.com)**

12. ALL creditors - name, address, account number and balance due (including house payment, car or truck

payment, etc., even if you plan to continue payment on the debt).

**First Mortgage:** Monthly Payment \_\_\_\_\_ Months Behind \_\_\_\_\_

Year purchased \_\_\_\_\_

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

**Second Mortgage:** Monthly Payment \_\_\_\_\_ Months Behind \_\_\_\_\_

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

**Vehicle #1:** Year/Make/Model \_\_\_\_\_ Miles \_\_\_\_\_  
When Purchased \_\_\_\_\_

Monthly Payment \_\_\_\_\_ Months Left on Loan \_\_\_\_\_

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

**Vehicle #2:** Year/Make/Model \_\_\_\_\_ Miles \_\_\_\_\_  
When Purchased \_\_\_\_\_

Monthly Payment \_\_\_\_\_ Months Left on Loan \_\_\_\_\_

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

**Other Bills – We will pull your credit reports. Please list un-reported bills such as pay day loans, medical bills and/or old cell phone bills**

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

\_\_\_\_\_  
Creditor account number balance

\_\_\_\_\_  
address city/state/zip

\_\_\_\_\_

