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BANKRUPTCY INTAKE FORM

Please complete the following pages as accurately and completely as possible.
Doing so will enable our firm to expedite the filing of your Bankruptcy petition.

Name of Debtor _____ SS# _____

Other names used in the past 6 years? _____

Present address _____

Home telephone _____

Cell telephone _____

Business telephone _____

Name of Spouse (Joint Debtor) _____ SS# _____

Other names used in the past 6 years? _____

Present address _____

Mailing address if different than above: _____

DO YOU OWN A HOME? IF YES, PLEASE COMPLETE THE FOLLOWING:

Description and location of property: _____

Address: _____

Is this your primary residence? Yes / No

How is property held? Husband & Wife, Solely, Jointly with other party, please specify: _____

What is the current Market Value? _____

First Mortgage

Name _____

Address _____

Account # _____

What is the principal balance of the loan? _____

Have you missed any mortgage payments? _____ If yes, how many? _____

Name, address and telephone number of attorney for First Mortgage, if any _____

Second Mortgage

Name _____

Address _____

Account # _____

What is the principal balance of the loan? _____

Have you missed any mortgage payments? _____ If yes, how many? _____

Name, address and telephone number of attorney for Second Mortgagee, if any _____

Do you own any other real property? _____

PERSONAL PROPERTY INFORMATION

<u>TYPE OF PROPERTY</u>	<u>DESCRIPTION</u>	<u>MARKET VALUE</u>
1. Cash on hand		_____
2. Deposits: Please specify name of Bank, account number and current balance.		
	Savings account _____	_____
	Checking account _____	_____
	Other _____	_____
3. Security deposits held by landlord, public utilities, or others.	_____	_____
4. Household Goods & Furnishings	_____	_____
5. Books, Pictures, Collectibles	_____	_____
6. Wearing Apparel	_____	_____
7. Furs & Jewelry	_____	_____
8. Firearms, sports, photographic, or other hobby equipment.	_____	_____
9. Life Insurance Policies:		
	Name of Company _____	
	Whole life/ Term _____	
	Cash surrender value _____	
10. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plan. Please specify:		_____
11. & 12. Do you have any interests in incorporated, unincorporated, partnerships or any kind of business venture? If so, please specify and approximate the value of such interest.		_____
13. Stocks / Bonds	_____	_____
14. Accounts receivable	_____	_____
15. Alimony, spousal or child support to which you are entitled.	_____	_____

HAVE YOU FILED A PREVIOUS BANKRUPTCY? YES / NO

Date filed _____ Case number _____
Case still pending? _____ If no, disposition _____

HAS YOUR PRESENT OR FORMER SPOUSE EVER FILED A BANKRUPTCY? YES / NO

Date filed _____ Case number _____
Case still pending? _____ if no, disposition _____

DO YOU OWN A CAR? IF YES, COMPLETE THE FOLLOWING

Year, make and model of car _____

Market Value _____

Is this car owned by husband, wife, jointly or other party, please specify. _____

Is this vehicle subject to a lien _____ or lease _____

Name of lender _____

Address _____

Account Number _____

If lien, principal balance due _____

If lease, when did lease begin? _____ When does it end? _____

What are the monthly payments? _____

Have you missed any payments? _____ If yes how many? _____

Are there any other persons who are co-obligors on the above? If so please state.

Name and address _____

DO YOU OWN A SECOND CAR OR BOAT? IF YES COMPLETE BELOW:

Year, make and model of car _____

Market Value _____

Is this car owned by husband, wife, jointly or other party, please specify. _____

Is this vehicle subject to a lien _____ or lease _____

Name of lender _____

Address _____

Account Number _____

If lien, principal balance due _____

If lease, when did lease begin? _____ When does it end? _____

What are the monthly payments? _____

Have you missed any payments? _____ If yes how many? _____

Are there any other persons who are co-obligors on the above? If so please state.

Name and address _____

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
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Co-debtor? _____
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Account# _____
Balance due _____
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Co-debtor? _____
Collection agency or attorney:

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Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
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Collection agency or attorney:

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Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

Name of Creditor _____
Address _____
_____ Zip _____
Account# _____
Balance due _____
Secured by _____
Co-debtor? _____
Collection agency or attorney:

If extra room is needed to list creditors, please attach separate sheet.

PERSONAL INCOME & EXPENSE INFORMATION

Are you Married _____ Separated _____ Divorced _____ Single _____

Your age _____ Age of Co-debtor _____

List all dependants:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HUSBAND:

What is your occupation or job title? _____

Name and address of employer _____

How long with employer? _____

WIFE:

What is your occupation or job title? _____

Name and address of employer _____

How long with employer? _____

Any other sources of income?

INCOME

DEBTOR

SPOUSE

How often do you get paid?

Weekly

Bi-weekly (every other week)

Semi-monthly (two times a month)

Gross Wages

Deductions:

Payroll Taxes

Insurance

Credit Union

Union Dues

Pension

Savings Bonds

Other (specify)

Net Take Home Pay

Income from operation of business

Interest and dividends received

Alimony or support payments received

Social security or other government assistance

Pension or retirement income

Other monthly income (specify)

Is your employment subject to seasonal changes? If yes, give details below.

Describe any increase or decrease of more 10% in any of the above categories anticipated,
To occur within the year following the filing of your bankruptcy petition.

MONTHLY EXPENDITURES

If this is a joint petition and the debtors maintain separate households, please indicate the separate expenses for each debtor.

Rent / Mortgage Payment _____
Second Mortgage Payments _____
Are real estate taxes included? Yes / No _____
Is property insurance included? Yes / No _____

Utilities:

Electricity & Heat _____
Water and/or sewer _____
Telephone _____
Other _____

Home maintenance & upkeep _____
Food _____
Clothing _____
Laundry and/or Dry cleaning _____
Medical & Dental expenses _____
Transportation, not including car payments _____
Recreation & Entertainment _____
Charitable contributions _____

Insurance (not deducted from wages or included in monthly home mortgage payments)

Homeowner's or Renter's _____
Life _____
Auto _____
Other _____

Taxes (not deducted from wages or included in monthly home mortgage payments)

Specify _____
Monthly car payments, if applicable _____
Other installment payments _____
Alimony, maintenance and support paid to others _____
Payments for support of dependants not living _____
with you _____
Expenses from operation of business, profession, _____
or farm _____

Other miscellaneous expenses:

Cable TV _____
Cigarettes _____
Child Care _____

STATEMENT OF FINANCIAL AFFAIRS

Please complete the following information as accurately as possible. Where necessary, please include dates and the names and addresses of individuals or firms.

1. What was your gross income from employment or operation of business for the following years? Include co-debtor income if joint petition.

Debtor: Current year to date: _____ Last Year: _____ 2 years ago: _____
Co-Debtor: Current year to date: _____ Last Year: _____ 2 years ago: _____

2. Income other than from employment or operation of business.

Debtor: Current year to date: _____ Last Year: _____ 2 years ago: _____
Co-Debtor: Current year to date: _____ Last Year: _____ 2 years ago: _____

3a. List payments to creditors made within the past ninety (90) days, exceeding \$600.00.

3b. List all payments made within one year immediately preceding the commencement of this case to, or for the benefit of creditors who were insiders.

4a. List all suits to which the debtor is or was a party to within one year immediately preceding the filing of this petition.

4b. Describe all property which has been attached, garnished, or seized in the past year.

5. List all property that has been repossessed by a creditor, sold at foreclosure sale, or transferred to the seller in the past year.

6a. Describe any assignment of property for the benefit of creditors made within 120 days prior to the filing of this petition.

- 6b. List all property which has been in the hands of a custodian, receiver, or court-appointed official, within one year prior to the filing of this petition.
7. List all gifts or charitable contributions made within one year prior except ordinary and usual gifts to family members aggregating less than 200.00.
8. List all losses from fire, theft, other casualty, or gambling within one year prior to the filing of this petition.
9. List all payments or property transferred by or on behalf of the debtor to any persons, including this firm or other attorneys for consultation concerning debt consolidation or relief under the bankruptcy law.
10. List all property transferred in the ordinary course of business or financial affairs of the debtor, whether transferred either absolutely or as security within the prior year.
11. List all bank accounts, (type, account #, name of bank, and closing balance) which have been closed within the past year.
12. List any safe deposit box, its location and description of contents which you have or had within the past year.
13. List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within the past 90 days.
14. List all property owned by another person that you hold or control.
15. If you have moved within the past two (2) years, list the address, duration of residence there and the name used.

IF THE DEBTOR IS OR WAS ENGAGED IN A BUSINESS WITHIN 2 YEARS PRIOR TO THIS DATE OR HAS BEEN ENGAGED IN BUSINESS AS AN OFFICER, DIRECTOR, MANAGING EXECUTIVE OR PERSON IN CONTROL OF A CORPORATION, A PARTNER (OTHER THAN A LIMITED PARTNER), OF A PARTNERSHIP, OR SOLE PROPRIETOR OR SELF-EMPLOYED, CONTINUE AND ANSWER QUESTIONS BELOW

16. Nature, location, and name of business.

If the debtor is an individual, list the names and addresses of all businesses in which the debtor was involved as a principal.

If the debtor is a partnership, list the names and addresses of all businesses in which the debtor was a partner or owned 5% or more of the voting securities.

If the debtor is a corporation, list the names and addresses of all businesses in which the debtor was a partner or owned 5% or more of the voting securities.

17. When did the business begin?

18. When did the business closed?