

THE LAW OFFICES OF ERNESTO D. BORGES & BILLBUSTERS

This information is strictly confidential. Please complete truthfully. We advise you based on information here.

**GENERAL
INFORMATION**

NAME First: _____ Middle _____ Last _____
 Former Names: _____ Social Security #: _____ - _____ - _____
 Date of Birth: ____/____/____ Marital Status: _____ Female Male
 Address: _____ Apt # _____ City _____ State _____ Zip _____
 County: _____ Cell #: _____ - _____ - _____ Home #: _____ - _____ - _____
 Emergency Contact Phone #: _____ - _____ - _____ Email Address: _____ @ _____

EMPLOYMENT

Employer Name: _____ How long at job? _____
 Employer Address: _____ City _____ State _____ Zip _____
 Job Title: _____ Work Phone Number: _____ - _____ - _____

**SPOUSE'S
INFORMATION**

Spouse's Name: First _____ Middle _____ Last _____
 Former names: _____ Social Security #: _____ - _____ - _____
 Date of Birth: ____/____/____ Marital Status: _____ Female Male
 Address: _____ Apt # _____ City _____ State _____ Zip _____
 County: _____ Cell #: _____ - _____ - _____ Home #: _____ - _____ - _____
 Emergency Contact Phone #: _____ - _____ - _____ Email Address: _____ @ _____

**SPOUSE'S
EMPLOYMENT**

Spouse's Employer Name: _____ How long at job? _____
 Employer Address: _____ City _____ State _____ Zip _____
 Job Title: _____ Work Phone Number: _____ - _____ - _____

**PRIOR
BK**

Have you or your spouse ever filed a Bankruptcy before? Yes No Chapter 7 Chapter 13
 What year(s)? _____ Dismissed _____ Discharged _____

DEPENDENT'S

Please explain Your Relationship to Your Dependent (daughter, son, mother, foster child, etc)
 Relationship: _____ Age: _____
 Relationship: _____ Age: _____
 Relationship: _____ Age: _____

**HOW DID YOU
HEAR
ABOUT US**

HOW DID YOU HEAR ABOUT US?
 SunTimes Ch 2 CBS-TV Ch 7 ABC-TV
 Comcast Cable 106.3 102.7 Tom Joyner
 Darryl King Show 1390 AM
 WVON Referral Other _____

**FOR OFFICE
USE ONLY**

FOR OFFICE USE ONLY:
 Date: _____
 Intake/Atty: _____
 D/T W
 R NR DNQ NOM WR _____
 Reason: _____

TOTAL DEBT

TOTAL AMOUNT OF DEBT

\$ _____

(not including house or car note)

- Credit Cards Medical
- Payday Loans Utility Bills
- Parking Tickets Other

PROPERTY

Do you pay a mortgage? Yes No Current Past Due
Amount Past Due \$ _____ = # of months _____

In Foreclosure? YES NO

Total Amount Owed \$ _____

Market Value \$ _____ Multiple Properties

Do you finance a car? Yes No Current Past Due

Amount Past Due \$ _____ = # of months _____

In Repossession Danger? YES NO

Other Vehicles

MONTHLY INCOME

I Get Paid: \$ _____

- weekly every 2 week
- twice a month per month

Net Take Home \$ _____
(after taxes)

Other Income Sources:

- Alimony/Child Support \$ _____
- Social Security \$ _____
- Unemployment \$ _____
- Pension/Retirement \$ _____
- Public Benefits \$ _____
- Rental Income \$ _____
- Other _____ \$ _____

TOTAL MONTHLY INCOME \$ _____

Have you received or are you expecting any money from any source other than listed above? Explain _____

AVERAGE MONTHLY BUDGET

- Rent or Mortgage Payment \$ _____
- Includes Real Estate Taxes? YES NO
- Includes Homeowners Insurance? YES NO
- 2nd Mortgage \$ _____
- Electricity \$ _____
- Heating/Air Conditioning (average) \$ _____
- Phone - including cell phone \$ _____
- Water/Sewer/Garbage \$ _____
- Cable and Internet \$ _____
- Home Maintenance \$ _____
- Food \$ _____
- Clothing \$ _____
- Laundry/Dry Cleaning \$ _____
- Medical/Dental (out-of-pocket) \$ _____
- Transportation—Gas/Public Transit \$ _____
- Auto Payment #1 \$ _____
- Auto Payment #2 \$ _____
- Auto Insurance \$ _____
- Life Insurance (not out of pay) \$ _____
- Health Insurance (not out of pay) \$ _____
- Other Insurance _____ \$ _____
- Auto Repairs/Maintenance \$ _____
- Charitable Contribution \$ _____
- Alimony/Child Support \$ _____
- Childcare/Babysitting \$ _____
- Personal Grooming \$ _____
- Recreation and Entertainment \$ _____
- Tuition/Books/School Supplies \$ _____
- IRS Repayment \$ _____
- Student Loan \$ _____
- Other _____ \$ _____

SPOUSE'S MONTHLY INCOME

My Spouse Gets Paid: \$ _____

- weekly every 2 week
- twice a month per month

Net Take Home \$ _____
(after taxes)

Other Income Sources:

- Alimony/Child Support \$ _____
- Social Security \$ _____
- Unemployment \$ _____
- Pension/Retirement \$ _____
- Public Benefits \$ _____
- Rental Income \$ _____
- Other _____ \$ _____

TOTAL MONTHLY INCOME \$ _____

Have you received or are you expecting any money from any source other than listed above? Explain _____

Bankruptcy fraud is investigated by the US Dept of Justice and can carry possible criminal charges which includes fines and up to 5 years in prison. The information I provided here is true and correct.

Date: _____

Signature _____

Joint Filer Signature _____