

PLEASE FILL OUT THIS FORM COMPLETELY AND THEN CALL THE OFFICE TO SCHEDULE AN APPOINTMENT REGARDING DEBT RELIEF OR PERSONAL FINANCIAL REORGANIZATION  
**ATHENS CONSUMER LAW CENTER, INC., BARRY GORDON IRWIN, attorney 706.548-9500**

---do not mail these forms back to us---

Last name                      First name      Middle                      Maiden Name                      Birthdate                      Social Security No.

Spouse's Last Name      First name      Middle                      Maiden Name                      Birthdate                      Social Security No.

Mailing Address:                      City                      State                      Zip                      Cellular phone number      County of Residence

Physical home address (if different):      City                      State                      Zip                      Home telephone number

Last previous address:                      City                      State                      Zip                      Calendar date you moved to present address

Are you?      Single: \_\_\_\_\_ Married: \_\_\_\_\_ Separated: \_\_\_\_\_ Divorced/widowed: \_\_\_\_\_  
**How many reside permanently in your home?**      Adults: \_\_\_\_\_ Children or youth: \_\_\_\_\_

**Where are you employed?**                      Name: \_\_\_\_\_  
how often paid at this job:                      Address: \_\_\_\_\_  
weekly/bi-weekly/semi-monthly/monthly      City.ST.zip: \_\_\_\_\_  
Your job title: \_\_\_\_\_

**Other or spouse's employment:**                      Name: \_\_\_\_\_  
how often paid at this job:                      Address: \_\_\_\_\_  
weekly/bi-weekly/semi-monthly/monthly      City.ST.zip: \_\_\_\_\_  
Other job title: \_\_\_\_\_

Are you buying or do you own your home? **Please list ALL MORTGAGES below, and how much you are behind, if any.**

THE VALUE OF YOUR REAL ESTATE: \_\_\_\_\_

★★ you must disclose all real property you own, if more than one parcel, use separate sheet ☆☆

<b>First Mortgage:</b> monthly payment: _____	<b>Second Mortgage:</b> monthly payment: _____
Name: _____	Name: _____
Address: _____	Address: _____
City.ST.zip: _____	City.ST.zip: _____
Total balance owed: _____	Total balance owed: _____
Past due amount or # of payments missed: _____	Past due amount or # of payments missed: _____

If you have more than two mortgages on your property, please check here \_\_\_\_\_ and write the above information on a separate sheet. **Unless you plan to surrender or give up your house, to propose a feasible Chapter 13 Plan for you it is important that we get accurate information on how much you are behind on your home mortgages, especially in a foreclosure situation.**

Please list all autos, trucks, trailers, boats and other big-ticket items on the top of the next page (see the example shown). Please include the model year, the make or brand, estimated value, amount owed if any and the name of any creditor with a lien on that property. *Please note that the name and address of any creditor on these house or motor vehicle assets must still be listed on the creditor listing which follows later in these forms.*

This form is also available online at [www.n-debt.net/go](http://www.n-debt.net/go) [click on Form 1]

Item Year	Make or Brand	Description	Value	Creditor Name	Debt
2001	Ford	Focus LX 4-dr	\$5,300	Ford Credit	\$6,200.00

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**<use additional sheet if you need more room to list more than five (5) assets>**

Has any of your property been seized, repossessed or foreclosed upon within the past year? If so, please list all pertinent information such as the date of the event, a description of the property taken, the party who took it and the value of the item taken?

1. \_\_\_\_\_
2. \_\_\_\_\_

**<use additional sheet if you need more room to list more than two (2) seizures>**

Do you have any law suits pending against you, or that you have filed and that are still pending or were pending within the past two years? If so please list them here by case name and number and also specify the county court where the case was filed. [You will also have to provide us with a copy of some of the documents pertaining to the case.]

1. \_\_\_\_\_
2. \_\_\_\_\_

**<use additional sheet if you need more room to list more than two (2) lawsuits>**

Have you paid any creditors at least \$600.00 or more within the past three months? This includes your mortgage, car payment, or anything other than rent. If so, please list the name of the creditor(s) here:

<addresses not necessary here because each creditor's address will be listed below>

---



---

**Please list each creditor here.** The new law requires you to use the address shown on the last two (2) monthly statements sent to you, and unlike the old law, the new law provides that creditors not listed or listed incorrectly will not have their debts discharged . **Please list the collection agent or attorney as a separate creditor in the space following the listing of the creditor for which the agent or attorney is collecting.** If more than one collection agent/attorney has been assigned the account and written you, just write the name of the additional agent in the margin near the creditor or other collection agent listing. **PLEASE BRING ALL OF THE BILLS AND STATEMENTS IN YOUR POSSESSION WITH YOU SO THAT WE CAN VERIFY THE ADDRESS YOU PROVIDE, AND MATCH UP THE ACCOUNT NUMBER FROM THE CREDIT REPORT WE WILL OBTAIN ON YOUR BEHALF.**

1. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_

2. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
3. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
4. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
5. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
6. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
7. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
8. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
9. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
10. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
11. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
12. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
13. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
14. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_

15. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
16. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
17. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
18. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
19. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
20. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
21. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
22. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
23. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
24. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
25. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
26. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_
27. Creditor: \_\_\_\_\_ Mailing address: \_\_\_\_\_  
city STATE zip: \_\_\_\_\_ Balance owed: \_\_\_\_\_ Security: \_\_\_\_\_

**IF YOU HAVE MORE THAN 27 CREDITORS INCLUDING COLLECTION AGENTS, PLEASE MAKE A COPY OF ONE OF THE PRIOR PAGES SO THAT WE CAN BE SURE THAT WE HAVE ALL OF YOUR CREDITORS LISTED IN THE CASE.**

**IMPORTANT QUESTIONS**

THESE QUESTIONS PROVIDE INFORMATION REQUESTED ON THE STATEMENT OF FINANCIAL AFFAIRS: <please use an additional sheet if the answer will not fit in the space provided>

**(1) Within the past twelve months (one year), have you:**

(a) CLOSED ANY BANK OR FINANCIAL ACCOUNTS? *checking, savings, certificate of deposit, credit union*  
**NO** \_\_\_\_\_ **YES** \_\_\_\_\_ (If yes, list date of event, bank name and location, account number, \$ amount at time of closing, and name account was listed in) : \_\_\_\_\_

(b) GIVEN, SOLD, or SIGNED AWAY ANY LAND, HOUSES, CARS, OR ANYTHING ELSE OF REAL OR PERCEIVED VALUE? **NO** \_\_\_\_\_ **YES** \_\_\_\_\_ (If yes, please give the following information for each item: description, date of event, value of item, name, address, and relationship to you of the person(s) who received the item from you) :

(c) SUFFERED ANY LOSSES DUE TO FIRE, THEFT ACCIDENT OR GAMBLING?

**NO** \_\_\_\_\_ **YES** \_\_\_\_\_ (If yes, please state for each such incident: description, date of event, value of item lost, and whether or not the loss was covered by insurance):

(d) HAVE YOU PAID ANY MONEY OR GIVEN ANYTHING OF VALUE TO A DEBT COUNSELING SERVICE, CREDIT COUNSELING SERVICE, OR LAWYER FOR CONSULTATION RELATED TO DEBT CONSOLIDATION, BANKRUPTCY, RELIEF UNDER THE BANKRUPTCY LAW OR PREPARATION OF ANY BANKRUPTCY PETITION? **NO** \_\_\_\_\_ **YES** \_\_\_\_\_ (If yes, please give the following information:

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN YOU	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
---------------------------	--	--

(2) AT ANYTIME, HAVE YOU EVER FILED FOR BANKRUPTCY OR CHAPTER 13 RELIEF BEFORE?

**NO** \_\_\_\_\_ **YES** \_\_\_\_\_ (If yes, and it was within the past eight [8] years, please give the following information: DATE FILED, LOCATION CITY WHERE FILED, CHAPTER OF CODE, CASE NUMBER, AND WHETHER OR NOT YOU RECEIVED A DISCHARGE IN THE CASE:)

(3) DO YOU HAVE ANY GARNISHMENTS OR WAGE DEDUCTIONS PENDING AGAINST YOUR PAYCHECK, INCLUDING DEDUCTIONS FOR CHILD SUPPORT? **NO** \_\_\_\_\_ **YES** \_\_\_\_\_

(If yes, please give complete information about the garnishment case and attach a copy of the summons or affidavit to these forms. IF FOR CHILD SUPPORT, WHO IS THE RECIPIENT, IS THE DEDUCTION FOR CURRENT SUPPORT OR PAST-DUE SUPPORT AND IS THE ACCOUNT BEING COLLECTED THROUGH A CHILD SUPPORT RECOVERY UNIT? WE MUST HAVE THE COMPLETE MAIL ADDRESS OF THE RECIPIENT FOR CHILD SUPPORT PAYMENTS!!)

---

---

Thank you for taking the time to complete this form! We look forward to meeting with you.

[If you wish to have a copy of this form for your records, please make a copy before you come to the appointment. Once you have met with the attorney and Attorney Work Product has been affixed in any form or manner to these documents, they become at that time and will forever remain the absolute property of ATHENS CONSUMER LAW CENTER, INC., BARRY GORDON IRWIN.]

### **UNDER NEW BANKRUPTCY LAW ENACTED BY REPUBLICAN CONGRESS, WHAT YOU HAVE TO PROVIDE IN ORDER TO FILE A CASE**

- (a) Certificate from non-profit approved credit counseling agency. We suggest you do this online at [www.hummingbird.org](http://www.hummingbird.org) prior to the appointment. We suggest Hummingbird for the simple reason that they will bill us for the certificate after the appointment and you do not have to prepay. We believe also they charge less. **CHAPTERS 7 AND 13**
- (b) Pay stubs for the current calendar month of your appointment and for the sixty days prior to your actual bankruptcy filing date; and a pay history or summary for the proceeding 7 months which includes the actual month that you file (which shows the gross income amounts per pay period plus the amount of each deduction from the gross income) if your pay is the same each payday with no variation, only one check is needed for the six month calculation **BOTH CHAPTER 7 AND CHAPTER 13**
- (c) if you are married, same info is required for paragraph (b)
- (d) Copy of one recent Bank Statement for each open depository (bank) & investment account (mutual funds, etc.), including educational IRAs **CHAPTER 13 ONLY**
- (e) photocopy of Federal Tax return for the previous calendar year which ended prior to the filing of the case **BOTH CHAPTER 7 AND CHAPTER 13**
- (f) Tax transcripts for 3 calendar years prior to year of Tax Return in item (e) above. Please call the IRS 1.800.829-1040 to request a transcript of your tax return for those previous years) - directions: dial number 1.800.829-1040, when IRS answers, press 2, then press 2; enter your social security number, press 1 when asked; if correct press 1, to order transcript press 4 or 5 [listen for choice]; enter the #'s only for your street address, press 4; enter the year you are requesting (example "2004"); press 1 if correct; press 2 to order additional years, when you are finished ordering the three transcripts needed press 3 then hang up. **WE DO NOT NEED THESE BUT IN A CHAPTER 13 CASE YOU MUST SWEAR THAT YOU HAVE FILED AND THIS IS ONE EFFECTIVE WAY TO PROVE THAT IRS RECEIVED YOUR RETURN.**
- (g) Property Tax statement from the Tax Commissioner on any real estate property you own or are buying (it must show assessed tax value/fair market value on the bill statement). **BOTH CHAPTER 7 AND CHAPTER 13, for asset valuation purposes.**
- (h) Some document giving the case number and names of parties, lawyers, etc., related to any court case you were involved in within the last 12 months **BOTH CH. 7 AND CH. 13**
- (i) All documents related to any prior bankruptcy case that you filed in the last 8 years
- (j) Last two bills from each creditor - we need the address in last two correspondences you received (*see page two above for additional information about this*)
- (k) Proof of any extraordinary expenses, such as school expense, home energy cost and any "special circumstances" cost **BOTH CHAPTER 7 AND CHAPTER 13,**  
**only needed if your income is above the "median income" for the State of Georgia for a family with same number of persons in the household as you have.**