THE LAW OFFICE OF TRACY A. BROWN, P.C.

ATTORNEYS AND COUNSELORS AT LAW

1034 S. BRENTWOOD BLVD., SUITE 1830 PHONE: (314) 644-0303

ST. LOUIS, MISSOURI 63117 FAX: (314) 644-0333

Name: ______________________________

Date / Time of Appointment: ______________ **@ : am / pm** ______________

Please print and complete the following Documents.

Bring all pages with you to your initial consultation.

To expedite the filing of your case, please bring the following information to your initial consultation:

_________ There is no charge due at the Initial Consultation; *however* if you would like to retain our services and be able to **tell your Creditors to call us (and not you)**, you can do so with a minimum of $100.

_________ Driver's License (or State issued I.D. card)

_________ Social Security Card

_________ Proof of income for the last month.

_________ Most recently filed Federal and State Tax Returns

STATEMENT OF FINANCIAL AFFAIRS

Attach additional sheets if necessary.

1. **Gross income from job**	**Debtor**	**Spouse**
What is your total year-to-date (YTD) gross income? i.e. How much have you made so far this year? On your pay stub, this is the *Total YTD Gross Income*. If you have more than one job you must add all of the YTD amounts together. If you operated a business in addition to working for a company, you must list the total gross income from everything.	2011 This Year $ ____________	2011 This Year $____________
What was your total gross income from last year? i.e. How much did you make last year? This can be found on last year's tax return. If you do not have the tax return, use your W-2s. If you operated a business in addition to working for a company, you must list the total gross income from everything.	2010 Last Year $ ____________	2010 Last Year $____________
What was your total gross income from the year **before** last year? This can be found on that year's tax return. If you do not have the tax return, use your W-2. If you operated a business in addition to working for a company, you must list the total gross income from everything.	2009 Year Before $ ____________	2009 Year Before $____________
2. **Additional income** (i.e. Not money from a job or operation of a business which was listed in #1 above.) Did you receive any money this year or in the 2 previous years from: SSI, disability, pension, retirement, unemployment, AFDC, child support, alimony, etc.? NOTE: Your Tax Return will list some of these amounts after your wages from working are listed.	2011 This Year $ ____________ 2010 Last Year $ ____________ 2009 Year Before $ ____________ **From:** ___ Social Security ___ SSI ___ unemployment ___ AFDC or other Government Aid ___ child support ___ disability ___ pension / retirement ___ other ____________ ___ other ____________ ___ other ____________	2011 This Year $____________ 2010 Last Year $____________ 2009 Year Before $____________ **From:** ___ Social Security ___ SSI ___ unemployment ___ AFDC or other Gov. Aid ___ child support ___ disability ___ pension / retirement ___ other ____________ ___ other ____________ ___ other ____________

3a. **In the last 90 days, have you made payments to any creditor that total more than $600?** (Don't include mortgage/rent or autos).	**Yes**____ How much in **total**: $________ Paid to: ____________ Address: ____________ Payment date:______ Still owe: $______	**No**__
3b. **If your debts are mostly business related, list each payment made to a creditor in the last 90 days that total more than $5,475**	**Yes**_____ How much in **total**: $________ Paid to: ____________ Address: ____________ Payment date:______ Still owe: $______	**No**__
3c. **In the last year, have you repaid any money to friends or family that you borrowed?** **NOTE**: **This includes tax refunds used to repay family or friends.**	**Yes**_____ How much in **total**: $________ Paid to: ____________ Address: ____________ Relationship to you: ____________ Payment date:______ Still owe: $______	**No**__
4a. **In the last year, have you been a party to a lawsuit?** i.e. Have you been sued or have you sued anyone? Please send me a copy of the Summons, Original Petition, Judgment, Notice of Garnishment or anything else you have from the court. ****Use additional sheets if necessary.****	**Yes**_____ State name of all parties: ____________ vs. ____________ Court: ____________ Case No. ____________ Reason for suit:____________ Status:___ pending; ___ won; ___ lost _____	**No**__

4b. **Has any property or money been seized, attached or garnished in the last year?** NOTE – This is not how much you owe them. It's how much they have actually taken so far and when they took it.	**Yes**_____ How much in **total**: $_______ From: Paycheck___; Bank account_____ Garnishment date(s)_______________ Creditor's name: _______________ Address:_______________ Is your check being garnished by this creditor now? _______________	**No**__
5. **Has any property been repossessed, sold at a foreclosure or Voluntarily returned to the creditor in the last year?** **What was the value of the property when taken / sold? $__________	**Yes**_____ When? _______________ What was it? _______________ Who took it? _______________ Address:_______________	**No**__
6a. **Has any property been assigned for the benefit of a creditor in the last 4 months or been held by a court or other party in the last year?** Terms of assignment:_______________	**Yes**_____ What was it? _______________ Date: _______Who has it now? _______ Address:_______________	**No**__
6b. **In the last 12 months, has any of your property been held by the Court, a Custodian or Receiver?**	**Yes**_____ What was it? _______________ Date: _______Who has it now? _______ Address:_______________	**No**__
7. **Have you made gifts or charitable contributions in the last year?** **Examples:** **Family members** **Friends** **Church** **United Way** **Salvation Army** (Answer **NO** if the total of all gifts to a family member is less than $200 or if the total given to each church or charity is less than $100)	**Yes**_____ When?_______________ Was it money?____ How much? $______ Describe anything else: _______________ _______________ How much was it worth? $_____________ Name of who you gave it to: _______________ Relationship to you:_______________ Address of person, church or charity: _______________	**No**__
8. **Have you had losses in the last year?** **Examples: fire, theft, gambling, burglary**	**Yes**____ Date _________; Value $__________ Fire ____ Theft ____ Gambling ____ Burglary____ Description: _______________ _______________ Did you have insurance?_____________ How much did insurance pay? $__________	**No**__
9. **Have you paid anyone other than Tracy A. Brown for advice on bankruptcy or consolidating your bills within the last year?**	**Yes**_____ How much in **total**? $__________ Paid to: _______________ When? _____ **Yes**_____ How much in **total**? $__________ Paid to: _______________ When? _____	**No**__
10. **Have you sold or given away any property in the last year?** (this includes garage sales & items sold at a flea market) **Have you signed any Quit Claim Deeds on any real estate in the last 2 years?** __________ **If your answer is "yes", provide the details on the back of this packet.**	**Yes**___ Date: _____ $ received:_______ Description:_______________ Sold/given to:_______________ Address:_______________	**No**__
11. **Have you closed any bank or other financial accounts in the last year?** Bank Name: _______________City & State_______________	**Yes**___ When? ________ Final balance $_______ Account Type: Checking _______Savings _______	**No**__
12. **Do you have a safe deposit box?** Bank Name: _______________City & State_______________ Name of other(s) with access to the box?_______________	**Yes**_____ Describe contents: __________ _______________	**No**__
13. **Have there been any setoffs by a creditor/bank in the last 90 days** (money from one account taken to pay another).	**Yes**_____ How much in **total**? $_______ Creditor: _______________ Address _______________ Date ______	**No**__

14. **Are you holding property that belongs to another person?** Relationship of person to you: father____, mother_____, describe other ______________________________	**Yes**_____ Owner: ______________ Address: ______________ Describe: ______________ Estimated Value $ ______________	**No**__
15. **Have you moved in the last 3 years?** Don't list your current address. Give complete address & move in & move out dates. Use additional paper if more than two.	**Yes** ____ Address______________ ______________ Dates moved : in ______ / out ________ Address______________ ______________ Dates moved : in ______ / out ________	**No**__
16. **Spouses and Former Spouses – Did you live in a community property state within the last 6 years?** If yes, identify the name of your current spouse and the name of your former spouse if that person lived with you in the community property state. Community property states include: Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington & Wisconsin.	**Yes**_____ State ______________ Name of current Spouse who lived with me ______________ Name of former Spouse who lived with me ______________	**No**__
17. **Environmental Issues** – Do you own any property that has any hazardous waste on it or have you been notified by the government that you may be potentially liable under or in violation of an Environmental Law?	**Yes** _______ Please complete the Environmental Information below.	**No**__
18. **You must complete additional questions 18 through 25 if any of the following applies:** a) You currently own or operate a business b) You owned or operated a business in the past 6 years c) You were an officer of any business d) You had more than a 5% interest in any business	NOTE: If you need the additional attachment for questions 18 through 25 and did not receive it at the consultation, please call the office and request it.	

*** What were the amounts of the last tax refunds you received? ***

Tax Year ______________

Federal $______________(if married & Returns were filed separately, list refund for Husband $________________ + Wife $________________)

State $______________(if married & Returns were filed separately, list refund for Husband $________________ + Wife $________________)

How did you spend this money? Answering "bills" is not enough information". The Trustee will ask for details.

I spent my tax refunds as follows:

Description	Amount
	$
	$
	$
	$
	$
	$
	$
Using my refunds, I repaid family / friends the following amount(s)? Name____________________ Amount $__________ Name____________________ Amount $__________ Name____________________ Amount $__________	$
Grand Total of how I spent the money	$

**** NOTE FOR PARALEGAL / ATTORNEY ****

Confirm status of upcoming Federal and State tax refunds for Schedule B.

BUDGET

Please circle marital status: **Married** **Single** **Divorced** **Separated**

Names of Dependents	Age	Relationship son, daughter, grand, etc.	Monthly Support Payments	Payment Type* R, P, S, or D
			$	
			$	
			$	

*Payment type: R=receiving payments, P=making payments, S=spouse's dependent, D=expenses for dependent not living at home

Job Information	**Debtor**	**Spouse**
Employer's Name ....> Employer's Address...........................> Zip Code & Phone Number ....> Occupation / Job Title............................> Number of years and months there............>	 Zip ________ Phone:________ ________ yrs ________ mos	 Zip ________ Phone:________ ________ yrs ________ mos
How do you get paid?	Weekly _____ Bi-weekly_____ Semi-monthly _____ Monthly _____	Weekly _____ Bi-weekly_____ Semi-monthly _____ Monthly _____
Check one: Are you paid hourly _____ or are you a salaried _____ employee?	_____hours per week at $______ Annual salary is $ ________	_____hours per week at $______ Annual salary is $ ________
Income		
Gross pay per pay period	$	$
Estimated overtime per pay period	$	$
Deductions per pay period Payroll taxes & social security withheld	$	$
Insurance	$	$
Union Dues	$	$
Other deductions (specify):	$	$
	$	$
Other Income		
Regular income from business or profession	$	$
Income from rental property	$	$
Pension & retirement income	$	$
Alimony received	$	$
Social security or government assistance, Food stamps, child support, alimony etc.	$ From: ________	$ From ________
Describe other:	$	$
Expenses	**Debtor**	**Spouse (only if separate)**
Rent - Mortgage - Lot rental – Pad Fee	$ Taxes / Insurance included? Y ___ N ___	$ Taxes / Insurance included? Y ___ N ___
Electricity & Gas (give average amount)	$	$
Water & Sewer	$	$
Telephone	$	$
Cable	$	$
Alarm System	$	$
Other:	$	$
Home maintenance (repairs & upkeep)	$	$
Food (home, work and eating out)	$	$
Cleaning products & toiletries (tissue, soap, etc.)	$	$
Clothes (include coats, boots, winter/summer items)	$	$
Laundry & Dry cleaning	$	$
Medical & Dental expenses	$	$
Transportation (gas, bus, Metrolink, taxi, etc)	$	$
Recreation, Clubs & Entertainment, Video Rental, Magazines, Newspapers, Movies etc.	$	$
Charitable contributions	$	$
Homeowner's/Renter's Insurance (if not listed above)	$	$
Life Insurance (if not listed above)	$	$
Health Insurance (if not listed above)	$	$
Auto Insurance	$	$
Annual personal property tax amount	$ % 12 =	$ % 12 =
Annual real estate taxes	$ % 12 =	$ % 12 =
Auto payments (only if filing Chapter 7)	$	$
Alimony payments	$	$
Child care	$	$
Other expenses (hair care, barber shop, etc)	$	$