LEFKOVITZ & LEFKOVITZ

INDIVIDUAL

BEFORE WE CAN FILE YOUR PETITION WE MUST HAVE THE FOLLOWING DOCUMENTS:

- LAST FOUR YEARS OF TAX RETURNS- YOUR 1040, 1040A, ETC.- NOT YOUR W2.

- LAST 12 MONTHS OF BANK STATEMENTS ON ALL ACCOUNTS IN INDIVIDUAL'S NAME- YOU CAN PRINT THEM ONLINE OR GET COPIES FROM YOUR BANK.

- LAST 6 MONTHS OF PAY CHECK STUBS- ASK YOUR EMPLOYER IF YOU DO NOT HAVE ALL OF THEM.

- IF YOU DO NOT HAVE ONE OR MORE OF THESE ITEMS (BEEN OUT OF WORK- NO PAY CHECK STUBS; DO NOT HAVE A BANK ACCOUNT- NO STATEMENTS; ETC.) YOU MUST SIGN AN AFFIDAVIT THAT EXPLAINS THE REASON WHY- YOU NEED TO LET OUR OFFICE KNOW SO THAT WE CAN PREPARE THE AFFIDAVIT.

- THE ATTACHED INTERVIEW PACKET NEEDS TO BE FILLED OUT AS MUCH AS POSSIBLE.

- DETAILED LISTING OF ALL CREDITORS- INCLUDING ADDRESS, AMOUNT OWED, AND ACCOUNT NUMBER.

- YOU MUST COMPLETE THE HUMMINGBIRD CREDIT COUNSELING COURSE AT **WWW. HBCCE.ORG** ONCE YOU COMPLETE THE ONLINE COURSE YOU MUST CALL **1-800-645-4959** TO HAVE A PHONE INTERVIEW WITH ONE OF THE COUNSELORS. OUR OFFICE IS A REGISTERED AGENT WITH HUMMINGBIRD AND WILL PULL

THE CERTIFICATE ONLINE WHEN THE PETITION IS READY TO BE FILLED.

- WHEN YOU HAVE ALL REQUIRED INFORMATION, PLEASE CALL OUR OFFICE TO SCHEDULE AN APPOINTMENT TO MEET WITH THE PARALEGAL.

HUMMINGBIRD

CREDIT COUNSELING AND EDUCATION, INC.

A NON-PROFIT CORPORATION DEDICATED TO QUALITY, UNBIASED FINANCIAL EDUCATION.

http://www.hbcce.org

phone 1-800-645-4959

fax 919-573-9474

DEBTOR 1: HUSBAND/INDIVIDUAL DEBTOR

(FIRST) (MIDDLE) (LAST) JR/SR/ETC.

ALL OTHER NAMES USED WITHIN THE LAST 6 YEARS YOUR AGE

ALL BUSINESS NAMES USED WITHIN THE LAST 6 YEARS (LIST ONLY SOLE PROPRIETOR BUSINESSES HERE)

E-MAIL ADDRESS: ____________________

STREET ADDRESS: ____________________ MAILING ADDRESS: ____________________

WHAT COUNTY DO YOU RESIDE IN? ____________________

TELEPHONE: __________ CELL PHONE: __________ WORK: __________

WHEN IS THE BEST TIME TO REACH YOU? ____________________ EXTENSION: __________

SOCIAL SECURITY NUMBER: __________ FEDERAL TAX I.D. NUMBER: __________

HOW DID YOU HEAR ABOUT US? ____________________

DEBTOR 2: WIFE/JOINT DEBTOR

(FIRST) (MIDDLE) (LAST) JR/SR/ETC.

ALL OTHER NAMES USED WITHIN THE LAST 6 YEARS YOUR AGE

ALL BUSINESS NAMES USED WITHIN THE LAST 6 YEARS (LIST ONLY SOLE PROPRIETOR BUSINESSES HERE)

E-MAIL ADDRESS: ____________________

STREET ADDRESS: ____________________ MAILING ADDRESS: ____________________

WHAT COUNTY DO YOU RESIDE IN? ____________________

TELEPHONE: __________ CELL PHONE: __________ WORK: __________

WHEN IS THE BEST TIME TO REACH YOU? ____________________ EXTENSION: __________

SOCIAL SECURITY NUMBER: __________ FEDERAL TAX I.D. NUMBER: __________

HOW DID YOU HEAR ABOUT US? ____________________

Prior/Pending Bankruptcy Cases

Has a bankruptcy case been filed by you or against you in the last 8 years? ☐ No ☐ Yes

If yes, in which district of which state was the case filed? ______________________________

Case Number: ____________________ Date Filed: ______________________________

Are there currently any bankruptcy cases pending against you, your business, your spouse, or your spouse's business? ☐ No ☐ Yes

If yes, name of debtor: ____________________ Relationship to you: ____________________

Case Number: ________________ Date Filed: ________________ Judge: ________________

In which district of which state was the case filed? ______________________________

Do you own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? ☐ No ☐ Yes (If yes, please attach a list and description of the property.)

Debtors Who Reside as Tenants of Residential Property

If you rent your home, does a landlord hold judgment against you? ☐ No ☐ Yes

If yes, please provide the name and address of the landlord.

Name: ____

Address: ____

City: ____________________ State: ______________ Zip: ________________

SECURED CREDITORS: Please provide the following information for all creditors that hold a security interest in your property.

CREDITOR'S NAME & ______________________ ACCOUNT NO.:

COMPLETE MAILING ______________________ ______________________

ADDRESS: ______________________ MONTHLY PAYMENT $______________________

______________________ # OF PAYMENTS BEHIND ______________________

AMOUNT OWED $______________________

COLLATERAL: ______________________

____

IS THIS PROPERTY LEASED? YES or NO

ESTIMATED VALUE: $______________________ OWNERSHIP INTEREST: ______________________%

CO-OWNER(S): ______________________ ______________________

______________________ ______________________

______________________ ______________________

IS THE 1^{ST}, 2^{ND}, ETC. LIEN ON THE COLLATERAL? ______________________

PRIORITY CREDITORS: Please provide the following information for all priority creditors, i.e., creditors that are taxing agencies, child support, alimony, employee wages, etc:

CREDITOR'S NAME &: ______________________ ACCOUNT NO.:

COMPLETE MAILING ______________________ ______________________

ADDRESS: ______________________ AMOUNT OWED $______________________

UNSECURED CREDITORS: Please provide the following information for all priority creditors, i.e., creditors that are for credit cards, doctor bills and all other debts that are not secured or priority:

CREDITOR'S NAME &: ______________________ ACCOUNT NO.:

COMPLETE MAILING ______________________ ______________________

ADDRESS: ______________________ AMOUNT OWED $______________________

NOTE: THE EASIEST WAY TO PROVIDE YOUR CREDITOR INFORMATION TO OUR OFFICE IS TO GIVE US YOUR MOST RECENT ACCOUNT STATEMENTS. FOR ANY DEBT THAT YOU DO NOT HAVE STATEMENT FOR, USE THE ABOVE INFORMATION AS A REFERNCE AND MAKE A LIST ON SEPARATE PAPER.

CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE		
Debtor's Age: Spouse's Age:	NAMES:	AGE:	RELATIONSHIP:

EMPLOYMENT: DEBTOR	SPOUSE
Occupation:	
How long employed:	
Name and Address of Employer:	

Income: (Estimate of average monthly income)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (pro rate if not paid monthly.)	1. $ ______	$ ______
2. Estimated monthly overtime	2. $ ______	$ ______
3. SUBTOTAL	3. $ ______	$ ______
LESS PAYROLL DEDUCTIONS		
a. Payroll Taxes and social security	a. $ ______	$ ______
b. Insurance	b. $ ______	$ ______
c. Union dues	c. $ ______	$ ______
d. Other (Specify) ______	d. $ ______	$ ______
4. SUBTOTAL OF PAYROLL DEDUCTIONS	4. $ ______	$ ______
5. TOTAL NET MONTHLY TAKE HOME PAY	5. $ ______	$ ______
6. Regular income from operation of business or profession or farm (attach detailed statement)	6. $ ______	$ ______
7. Income from real property	7. $ ______	$ ______
8. Interest and dividends	8. $ ______	$ ______
9. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	9. $ ______	$ ______
10. Social security or other government assistance (Specify) ______	10. $ ______	$ ______
11. Pension or retirement income	11. $ ______	$ ______
12. Other monthly income (Specify) ______	12. $ ______	$ ______
13. TOTAL MONTHLY INCOME	13. $ ______	$ ______

14. TOTAL COMBINED MONTHLY INCOME 14. $ ______ (Report also on Summary of Schedules)

Describe any increase of decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document.

EXPENSES

	EXPENSES	HOUSEHOLD 1 MONTHLY AMOUNT	HOUSEHOLD 2 (if applicable) MONTHLY AMOUNT
1.	RENT/MORTGAGE A. Does payment include Taxes? B. Does payment include Insurance?	$ ________ A. YES or NO B. YES or NO	$ ________ A. YES or NO B. YES or NO
2.	ELECTRICITY & HEATING	$ ________	$ ________
3.	WATER & SEWAGE	$ ________	$ ________
4.	TELEPHONE	$ ________	$ ________
5.	OTHER UTILITIES A. CABLE/SATELLITE B. INTERNET C. CELL PHONE D. TRASH E. ALARM F. OTHER: G. OTHER:	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________ F. $ ________ G. $ ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________ F. $ ________ G. $ ________
6.	HOMEOWNER'S ASSOCIATED DUES AND/OR HOME MAINTENANCE	$ ________	$ ________
7.	FOOD	$ ________	$ ________
8.	CLOTHING	$ ________	$ ________
9.	LAUNDRY & DRY CLEANING	$ ________	$ ________
10.	MEDICAL & DENTAL EXPENSES	$ ________	$ ________
11.	TRANSPORTATION	$ ________	$ ________
12.	ENTERTAINMENT, RECREATION, GYM, NEWSPAPERS, MAGAZINES, ETC.	$ ________	$ ________
13.	CHARITABLE CONTRIBUTIONS	$ ________	$ ________
14.	INSURANCE A. HOMEOWNERS/RENTERS (if not included in Mortgage) B. LIFE INSURANCE C. HEALTH INSURANCE D. AUTO INSURANCE E. OTHER ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________

	EXPENSES	HOUSEHOLD 1 MONTHLY AMOUNT	HOUSEHOLD 2 (if applicable) MONTHLY AMOUNT
15.	TAXES A. REAL ESTATE B. IRS C. STATE D. CITY E. COUNTY	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________
16.	VEHICLE PAYMENTS A. VEHICLE 1 B. VEHICLE 2 C. VEHICLE 3	 A. $ ________ B. $ ________ C. $ ________	 A. $ ________ B. $ ________ C. $ ________
17.	ALIMONY, CHILD SUPPORT, ETC.	$ ________	$ ________
18.	PAYMENTS DEPENDENTS NOT LIVING IN THE HOME	$ ________	$ ________
19.	EDUCATION FOR DISABLED PERSON	$ ________	$ ________
20.	CHILDCARE	$ ________	$ ________
21.	SCHOOL TUITION	$ ________	$ ________
22.	COLLEGE TUITION & EXPENSE	$ ________	$ ________
23.	OTHER EXPENSES NOT ALREADY LISTED: A. ________ B. ________ C. ________ D. ________ E. ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________	 A. $ ________ B. $ ________ C. $ ________ D. $ ________ E. $ ________
24.	BUSINESS EXPENSES PROVIDE AN ITEMIZED LIST OF AL MONTHLY INCOME AND EXPENSES FOR YOUR BUSINESS.	$ ________	$ ________

SCHEDULE A, REAL ESTATE

List all real estate which you own or are joint owner of, even if you still owe money on the property.

PROPERTY ADDRESS	OWNER DEBTOR, HUSBAND, WIFE, OTHER, ETC.	ESTIMATED VALUE	YOUR % OF OWNERSHIP

SCHEDULE B, PERSONAL PROPERTY

For each type of property listed below, indicate whether you own any property of that category, and, if you do, fill in the remaining information if there is not enough room for you to answer any question, use the back of this form or separate paper. NOTE: Some sections have examples to help give you an idea of how to list your personal property; however, keep in mind that all property is to be fully described and a value given.

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER (name other)	VALUE
CASH/CASH TILL				
BANK ACCOUNTS- Checking/Savings Account, Certificates of deposit, other bank accounts, etc.		For each account state the following: Name of Bank, Type of Account, Owner(s) of the Account and the Balance of the Account. 1. ________ 2. ________ 3. ________ 4. ________ 5. ________		$ ______ $ ______ $ ______ $ ______ $ ______
SECURITY DEPOSITS- With utility companies, landlord, etc.		1. ________ 2. ________		$ ______ $ ______

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER (name other)	VALUE
HOUSEHOLD GOODS- Including all furniture, audio, video, electronics, computer equipment, etc.		Provide an itemized list of all and the estimated value of each. (i.e., 3 Bedroom Suites $1,000, 2 TVs $50, Computer Equipment $500, etc.)		
BOOKS, PICTURES, ART OBJECTS, RECORDS, COMPACT DISCS, ETC.		Provide an itemized list of all and the estimated value of each. (i.e., 45 Books, $20, 100 CDs, $100, etc.)		
CLOTHES				
FURS & JEWELRY		Provide an itemized list of all and the estimated value of each. (i.e., Diamond Bracelet, $500, Jade Earrings, $50, Misc. Costume Jewelry $50)		
SPORTS, HOBBY, PHOTOGRAPH, FIREARMS, FISHING GEAR, ETC.				

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER (name other)	VALUE
INSURANCE POLICIES		State the name of the Insurance Company, the name(s) of all Beneficiaries and the Cash Value, if any, for each policy. 1. ______________________ 2. ______________________ 3. ______________________		 $ __________ $ __________ $ __________
ANNUITIES				
INTEREST IN AN EDUCATION IRA				
RETIREMENT PLAN				
STOCK AND INTEREST IN INCORPORATED PARTNERSHIP, JOINT VENTURE BUSINESSES, ETC.				
BONDS				
ACCOUNTS RECEIVABLE		Attach a list that includes the name of each receivable and the amount owed to you for completed work. Attach a list that includes the name of each receivable and the amount anticipated for all jobs in progress/incomplete work.		

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER, (name other)	VALUE
PAST DUE CHILD SUPPORT, FAMILY SUPPORT, ALIMONY DUE TO YOU				
OTHER CONTINGENT, UNLIQUIDATED OR LIQUIDATED DEBTS OWED TO YOU, INCLUDING TAX REFUNDS, COUNTER CLAIMS, ETC.				
EQUITABLE OR FUTURE INTERESTS IN LIFE ESTATES				
INTEREST IN ESTATE OF DECENDENT OR LIFE INSURANCE PLAN OR TRUST				
PATENTS, COPYRIGHTS, OR OTHER INTELLECTUAL PROPERTY				
LICENSES, FRANCHISES, ETC.				
VEHICLES, TRAILERS, ETC.		State the make, model, year and estimated value of each vehicle that you own. 1. ____________ 2. ____________ 3. ____________ 4. ____________ 5. ____________		$ ________ $ ________ $ ________ $ ________ $ ________
BOATS, MOTORS, ETC.		1. ____________ 2. ____________		$ ________ $ ________

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER, (name other)	VALUE
AIRCRAFT				
OFFICE EQUIPMENT & SUPPLIES				
MACHINERY, FIXTURES, ETC.				
INVENTORY				
ANIMALS, LIVESTOCK, ETC.				
CROPS- GROWING AND/OR HARVESTED				

PROPERTY DESCRIPTION	N/A	DESCRIPTION & LOCATION	HUSBAND, WIFE, OTHER (name other)	VALUE
FARMING EQUIPMENT & IMPLEMENTS				
FARM SUPPLIES, CHEMICALS, FEED, ETC.				
ALL OTHER PERSONAL PROPERTY OF ANY KIND THAT HAS NOT BEEN PREVIOUSLY LISTED ABOVE				

Statement of Financial Affairs

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under Chapter 12 or 13, and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

If you have no information to report for a question, check the "NONE" box.

1. Income from employment or operation of business.

State your gross income from employment or operation of business: If you have not received an income from employment during the two years immediately preceding this calendar year, check this box:

☐None

Period	$Amount	Source	Husband/Wife
January 1 of this year through Date of commencement of case			
Last year, (January 1- December 31)			
The year before last. (January 1 – December 31)			

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

State the amount of income received other than from employment or operation of business during the two years immediately preceding the commencement of this case:

☐None

Period	$Amount	Source	Husband/Wife
During the last year			
Year before last			

3. Payments to creditors

a. ***If your debts are primarily consumer debts,*** **list all payments on loans, installment purchases of goods or services, and other debts, aggregating more than $600 to any creditor made with 90 days immediately preceding the commencement of this case. Indicate with an asterisk (*) any payments that were made on account of a domestic support obligation, or that were made as part of an alternative repayment plan.**

☐None

Name and Address of Creditor	Dates of Payments	Amount paid	Amount still owed

b. ***If your debts are primarily consumer debts,*** **list each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than $5,850 ($5,475 before 4/1/2010). Indicate any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency.**
(Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☐ **None**

Name and Address of Creditor	Dates of Payments	Amount paid	Amount still owed

c. ***All debtors.*** **List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are were "insiders". ("Insiders" include your relatives, your business partners and their relatives, your corporations, or your affiliates.)**

☐**None**

Name and Address of Creditor and Relationship to You	Dates of Payments	Amount Paid	Amount still owed

4. Suits, executions, garnishments and attachments.

a. List all suits and administrative proceedings to which you are or were a party within one year preceding the filing of this case.

☐**None**

Caption of Suit and Case Number	Nature of Proceeding	Court or Agency and Location	Status on Disposition

b. Describe all property that has been garnished, seized, or attached under any legal or equitable process within one year immediately preceding the commencement of this case.

☐**None**

Name and Address of Person/Company for Whom the Property Was Seized (Creditor)	Date of Seizure	Description and Value of Property

5. Repossessions, foreclosures, and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller, within one year immediately preceding the commencement of this case.

☐None

Name and Address of Creditor	Date of Repossession, Foreclosure, Transfer or Return	Description and Value of Property

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case.

☐None

Name and Address of Assignee	Date of Assignment	Terms of Assignment/Settlement

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case.

☐None

Name and Address of Custodian	Name and Location of Court, Case Title and Number	Date of Order	Description and Value of Property

7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than $200 in value per individual family member and charitable contributions aggregating less than $100 per recipient.

☐None

Name and Address of Recipient	Relationship to You, if Any	Date of Gift	Description and Value of Gift

8. List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☐ **None**

Description and Value of Property	Description of Circumstances and Amount Covered by Insurance, if Any	Date of Loss

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consultation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of the case.

☐ **None**

Name and Address of Payee	Date of Payment	Name of Person Who Paid, if Not You	Amount of Money/Description and Value of Property

10. Other transfers (including sale of your property)

a. List all other property, other than property transferred in your ordinary course of business or financial affairs, transferred either absolutely or as a security within two years immediately preceding the commencement of the case.

☐ **None**

Name and Address of Transferee and Relationship to You	Date of Transfer	Description of Property Transferred and Value Received

b. List all property you transferred within 10 years immediately preceding the commencement of this case to a self-settled trust, or a similar device of which you are the beneficiary.

☐ **None**

Name of Trust or Similar Device	Date of Transfer	Amount of Money or Description and Value of Property or Interest

11. Closed financial accounts

List all financial accounts and instruments held in your name or for your benefit which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case.

☐ None

Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale of Closing

12. Safe deposit boxes

List each safe deposit or other box or depository in which you have or have had securities, cash, or other valuables within one year immediately preceding the commencement of this case.

☐ None

Name and Address of Bank or Other Depository	Name and Address of Those With Access to Box or Depository	Description of Contents	Date of Transfers, if Any

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within 90 days preceding the commencement of this case.

☐ None

Name and Address of Creditor	Date of Setoff	Amount of Setoff

14. Property held for another person

List all property that you hold or control that is owned by another person.

☐ None

Name and Address of Owner	Description and Value of Property	Location of Property

15. Prior address of debtor

If you have moved within the three years immediately preceding the commencement of this case, list all residences during the last three years, excluding your present address.

☐ None

Address	Your Name at the Time	Dates of Occupancy

16. Spouses and Formers Spouses

If you reside or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of your spouse and of any former spouse who resides or resided with you in the community property state.

☐ **None**

Name

17. Environmental Information

For the purpose of this question, the following definition apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface, water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.
"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.
"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which you received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

☐ **None**

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law

b. List the name and address of every site for which you provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

☐ **None**

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which you are or were a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

☐ **None**

Name and Address of Governmental Unit	Docket Number	Status of Disposition

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more in the voting or equity securities within the six years immediately preceding the commencement of this case.

☐ **None**

Name	Taxpayer I.D. Number (EIN)	Address	Nature of Business	Beginning and End Dates of Operation

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C.§ 101.

☐ **None**

Name	Address

19. Books, records, and financial statements

a. List all bookkeepers and accountants who, within the two years immediately preceding the filing of this bankruptcy case, kept or supervised the keeping of books of account and records.

☐ None

Name and Address	Dates Services Rendered

b. List all firms or individuals who, within the two years immediately preceding the filing of this bankruptcy case, have audited the books of account and records, or prepared a financial statement of the debtor.

☐ None

Name	Address	Dates Services Rendered

c. List all firms or individuals who, at the time of the commencement of this case, were in possession of your books of accounts and records. If the records are not available, explain.

☐ None

Name and Address	Comments

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

☐ None

Name and Address	Date Issued

20. Inventories

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

☐ **None**

Date of Inventory	Inventory Supervisor	Dollar Amount of Inventory (specify cost, market, or other basis)

b. List the name and address of the person possessing the records of each of the two inventories reported in a.) above.

☐ **None**

Date of Inventory	Name and Address of Custodian of Inventory Records

21. Current partners, officers, directors, and shareholders

a. If your business is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

☐ **None**

Name and Address	Nature of Interest	Percentage of Interest

b. If your business is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5% or more of the voting securities of the corporation.

☐ **None**

Name and Address	Title	Nature and Percentage of Stock Ownership

22. Former partners, officers, directors and shareholders

a. If your business is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

☐ **None**

Name and Address	Date of Withdrawal

b. If your business is a corporation, list all officers or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

☐ **None**

Name and Address	Title	Date of Termination

23. If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

☐ **None**

Name and Address of Recipient and Relationship to You	Date and Purpose of Withdrawal	Amount of Money or Description and Value of Property

24. Tax Consolidation Group

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six year period immediately preceding the commencement of this case.

☐ **None**

Name of Parent Corporation	Taxpayer Identification Number

25. Pension Funds

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of this case.

☐ **None**

Name of Pension Fund	Taxpayer Identification Number