

DATE AND TIME OF CONSULTATION _____ at _____ a.m./p.m. _____

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419-884-0655
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GENERAL INFORMATION

Your Full Name _____
Other Names Used in the last 8 years _____
Home Address _____
City _____ County _____
State _____
Zip Code _____ How Long? _____
Cell Phone _____
E-Mail _____
Social Security Number _____
Date of Birth _____

Spouse's Full Name _____
Other Names Used in the last 8 years _____
Spouse's Address _____
City _____ County _____
State _____
Zip Code _____ How Long? _____
Cell Phone _____
E-Mail _____
Social Security Number _____
Date of Birth _____

☐ Never Married ☐ Married and living together ☐ Married and living apart ☐ Divorced ☐ Widowed

Employer's name _____
Employer's **full** address _____
Job title _____

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Employer's **full** address _____
Job title _____

Dates employed _____
Pay Frequency:
☐ Weekly ☐ Bi-weekly ☐ Semi-monthly ☐ Monthly

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Pay Frequency:
☐ Weekly ☐ Bi-weekly ☐ Semi-monthly ☐ Monthly

List all Prior Addresses During the Past 3 Years for you and your Spouse and the dates resided at each:

Address: _____ City _____ Zip _____ **County** _____
Dates: From _____ To _____ If State is other than Ohio, please list: _____

Address: _____ City _____ Zip _____ **County** _____
Dates: From _____ To _____ If State is other than Ohio, please list: _____

Address: _____ City _____ Zip _____ **County** _____
Dates: From _____ To _____ If State is other than Ohio, please list: _____

Will this be a joint bankruptcy with your spouse? Yes or No

Have you or your spouse filed bankruptcy in the past 8 years? Yes or No If so, State & County Filed In

List the Full Name and Age of all minor children or any dependents:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you own or are you buying any real estate? Yes or No Number of Properties: _____

How many mortgages are on each property? _____

Are you current in all of your mortgages? Yes or No If no, which mortgage are you delinquent on: 1st, 2nd, 3rd

Have you ever done a mortgage modification? Yes or No

Have foreclosure proceedings begun? Yes or No If yes, please provide a copy of the Court papers

Are you a party to any lawsuit? Yes or No If yes, please provide a copy of the Court papers

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? Yes or No If yes, please describe.

WE REQUIRE THAT YOU BRING WITH YOU TO OUR FIRST MEETING:

1) DOCUMENTATION OF YOUR INCOME FOR THE PAST SIX MONTHS. This usually means your pay advices. The documentation should reflect your gross income and all deductions therefrom, i.e. Federal, State and Local Taxes, Union Dues, Insurance Deductions, Uniform Deductions, 401(k) Contributions etc.

If you are self employed we need a profit and loss statement for each of the proceeding six months.

2) We will also need to review a budget for your household expenses. Our website has a budget form to complete prior to our consultation.

3) A list of all vehicles titled in your name including year, make, model, VIN and current mileage. Please also bring the balance owed on the vehicles.

Please review our website for additional information www.joshbrownbankruptcy.com

How did you hear about us: (please circle)

Referral Internet Other _____