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Thank you so much for allowing us to assist you. We are enclosing the basic information we require to advise you. Once you have completed this information and returned it to us, we will call you to schedule a time to speak with one of our attorneys.

If you have any questions, please feel free to call us.

Sincerely,

Hancock & Beard

Enclosure



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Do you owe: IRS, STATE, BACK CHILD SUPPORT OR STUDENT LOANS ( ) yes ( ) no

**SECURED DEBTS:** Please list all the debts you owe on homes, automobiles (including mileage), time shares, boats, storage units, secured loans (with household goods & electronics used for collateral) and etc.

Name of Creditor	Collateral	Value of Collateral	Total Amount Owed	Monthly Payment	How Far Are You Behind?	When did you get the loan?

**UNSECURED DEBTS:** Please list all the debts you owe for medical bills, payday loans, credit cards, signature loans, deficiency balances, etc. \$ \_\_\_\_\_

**Assets:** Please list any assets you own free and clear of any mortgages and liens.

_____	_____
_____	_____
_____	_____

**NET INCOME:**

(YOUR BRING HOME PAY)

**Husband:** \$ \_\_\_\_\_ weekly/ bi-weekly/monthly

**Wife:** \$ \_\_\_\_\_ weekly/ bi-weekly/monthly

**Other Income:**

\$ \_\_\_\_\_ weekly/ bi-weekly/monthly From: \_\_\_\_\_

\$ \_\_\_\_\_ weekly/ bi-weekly/monthly From: \_\_\_\_\_

**How many minor children live in your household?** \_\_\_\_\_

**Have you lived in Alabama for the past 2 years?** \_\_\_\_\_

**MONTHLY EXPENSES:**

Mortgage/ Rent \_\_\_\_\_

Electricity \_\_\_\_\_

Propane/ Gas \_\_\_\_\_

Cable \_\_\_\_\_

Water/Sewage \_\_\_\_\_

Telephone \_\_\_\_\_

Garbage \_\_\_\_\_

Home maint. \_\_\_\_\_

Groceries \_\_\_\_\_

Clothing \_\_\_\_\_

Medical exp. \_\_\_\_\_

Dental exp. \_\_\_\_\_

Auto fuel \_\_\_\_\_

Vehicle maint. \_\_\_\_\_

Entertainment \_\_\_\_\_

Home insurance \_\_\_\_\_

Life insurance \_\_\_\_\_

Health Insurance \_\_\_\_\_

Auto insurance \_\_\_\_\_

Alimony/ child sup. \_\_\_\_\_

Child care \_\_\_\_\_

Diapers/ Formula \_\_\_\_\_

Student loan \_\_\_\_\_

School expenses \_\_\_\_\_

Charitable contr. / \_\_\_\_\_

Other \_\_\_\_\_

Church tithes

Other \_\_\_\_\_

**List the total of all income you have received in the past 6 months:**

Gross Wages \$ \_\_\_\_\_

Self Employment \$ \_\_\_\_\_

Tax Refunds \$ \_\_\_\_\_

Food Stamps \$ \_\_\_\_\_

Family Gifts \$ \_\_\_\_\_

Unemployment Benefits \$ \_\_\_\_\_

Social Security Benefits \$ \_\_\_\_\_

Other Retirement \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

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**For Office Use Only:**

Prior Bankruptcies:

Right to Sue:

Tax Return Status:

Assets/ Transfers: