## OFFICE OF THE CHAPTER 13 TRUSTEE

DYNELE L. SCHINKER-KUHARICH, TRUSTEE

## **DEBTOR(S) INFORMATION FORM**

COMPLETE THIS FORM AND GIVE IT TO YOUR ATTORNEY AT LEAST 7 DAYS PRIOR TO YOUR MEETING OF CREDITORS.

Debtor Name:	Co-Debtor Name:		
Preferred Pronouns (circle one): He/Him She/Her They/Them	Preferred Pronouns (circle one): He/Him She/Her They/Them		
Address:	Address:		
City:Zip:	City: Zip:		
Telephone:	Telephone:		
Email Address:	Email Address:		
Employer:	Employer:		
Length of time at this employer:	Length of time at this employer:		
How often do you get paid? □ Weekly □ BiWeekly □ SemiMonthly □ Monthly	How often do you get paid? □ Weekly □ BiWeekly □ SemiMonthly □ Monthly		
Do you receive bonuses, commission, or incentive pay?	Do you receive bonuses, commission, or incentive pay?		
If yes, mark frequency:  Monthly  Quarterly  Annual Estimated amount	If yes, mark frequency:  Monthly  Quarterly  Annual  Estimated amount		
List all sources of income other than the above employer:	List all sources of income other than the above employer:		

Please list all others living in your household (attach additional sheet if more than 5):

1	NAME	AGE	<b>RELATION TO YOU</b>
2			
2			
3.			
4.			
5.			

Please list all vehicles, boats, motorcycles, recreational vehicles, trailers, etc. that you own (attach additional sheet if more than 5):

YEAR/MAKE/MODEL	MILEAGE	CONDITION	INSURANCE CO.			
1						
2 3						
4						
5						
Does anyone owe you any money? If so, who and how much?						
Do you have any claims where you can recover money from someone for some reason?						
Do you have a lawyer handling something for you other than this bankruptcy case?						
Do you have an obligation to pay child support or alimony? If so, when does that end?						
Do you gamble online, at casinos, or otherwise?						
I hereby attest that the above information is true and accurate to the best of my knowledge and belief.						