

CLIENT INTERVIEW SHEET

To assist the attorney in answering your questions and concerns, please supply the following information. As with all communications between you and the attorney the information you supply is **ABSOLUTELY CONFIDENTIAL**. If you need additional room to answer the questions thoroughly, please feel free to use additional sheets of paper.

TODAY'S DATE: _____

Please **check** where you **FIRST** heard about Hildebrand Law Office?

Internet - what site: _____; By Previous Client ; _____

Other _____

Attorney Referral ; if Attorney, his/her name: _____.

PROVIDE THE FOLLOWING GENERAL INFORMATION ABOUT:

A. Individual

B. Spouse (if Applicable)

Name: _____
First Middle Last

Maiden Name: _____

D.O.B.: _____

S.S.#: _____ - _____ - _____

D.L. # _____

Mailing Address: _____

Residence Address: _____

County: _____

Phone: _____ - _____ - _____

Cell: _____ - _____ - _____

Email: _____

Length of time at above residence: _____

Previous Address(es) (if less than 3yrs at current residence):

Address: _____

Mo/Yr: _____ through _____

Address: _____

Mo/Yr: _____ through _____

Address: _____

Mo/Yr: _____ through _____

Name: _____
First Middle Last

Maiden Name: _____

D.O.B.: _____

S.S.#: _____ - _____ - _____

D.L. # _____

Mailing Address: _____

Residence Address: _____

County: _____

Phone: _____ - _____ - _____

Cell: _____ - _____ - _____

Email: _____

Length of time at above residence: _____

Previous Address (if less than 3yrs at current residence):

Address: _____

Mo/Yr: _____ through _____

Address: _____

Mo/Yr: _____ through _____

Address: _____

Mo/Yr: _____ through _____

Other names used in last 6-years (include business names):

Other names used in the last 6-years (include business names):

Sex: Male _____ Female _____

Sex: Male _____ Female _____

Marital Status:

Single _____ Divorced _____ Widowed _____ Married and living together _____ Married and living apart _____

Children living with you:

AND/ OR

Children you pay support for:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Monthly child Support you receive \$ _____

Monthly child support you must pay \$ _____

CURRENT EMPLOYMENT

A. Individual:

Employer's name: _____

Employer's Address: _____

Telephone: (_____) _____

Position with employer: _____

Length of time employed: _____

Self-employment or in business?

_____ Yes _____ No

If more than one employer and/or are self employed provide the information about other employer.

B. Spouse (if married):

Employer's name: _____

Employer's Address: _____

Telephone: (_____) _____

Position with employer: _____

Length of time employed: _____

Self-employment or in business?

_____ Yes _____ No

If more than one employer provide the information about other employer.

GROSS INCOME RECEIVED FROM EMPLOYMENT, TRADE, AND PROFESSION:

You/Joint-1:

Spouse/Joint-2:

1. Year to Date:
a. Source: _____
b. Amount: \$ _____

1. Year to Date:
a. Source: _____
b. Amount: \$ _____

2. Last year:
a. Source: _____
b. Amount: \$ _____

2. Last year:
a. Source: _____
b. Amount: \$ _____

3. Previous year:
a. Source: _____
b. Amount: \$ _____

3. Previous year:
a. Source: _____
b. Amount: \$ _____

**INCOME RECEIVED FROM ALL OTHER SOURCES:
(Child support, Unemployment Compensation, Disability, etc.)**

You/Joint-1:

Spouse/Joint-2:

1. Year to Date:
a. Source: _____
b. Amount: \$ _____

1. Year to Date:
a. Source: _____
b. Amount: \$ _____

2. Last year:
a. Source: _____
b. Amount: \$ _____

2. Last year:
a. Source: _____
b. Amount: \$ _____

3. Previous year:
a. Source: _____
b. Amount: \$ _____

3. Previous year:
a. Source: _____
b. Amount: \$ _____

GENERAL FINANCIAL INFORMATION

1. To what tax refunds are you entitled: _____

2. Do you have a checking or savings account? If yes, fill in information below.

- a. Name of institution _____
Type of account _____ Current Balance _____
- b. Name of institution _____
Type of account _____ Current Balance _____
- c. Name of institution _____
Type of account _____ Current Balance _____

3. Do you owe money for home, car, signature loans, credit cards or ready reserve account to any of the Banks or Credit Unions

where you have a checking or savings accounts? Yes No

NOTE: If you do owe money, please be advised that your Bank may freeze your bank accounts, please tell your Attorney even if he does not specifically ask you about these accounts.

4. Do you have a safe deposit box? If so, where? _____

5. Do you have a storage unit? If so, where is it located? _____

6. Have you filed a case under Chapter 13 in the past eight years? Yes No

If yes, please list State, Case #, and Date of filing: _____

7. Have you filed any bankruptcy case in the past eight years? Yes No

If yes, please list State, Case #, and Date of filing: _____

8. Do you now have or have you ever had a V.A., F.H.A. or other Government Guaranteed Mortgage Loan?

Yes No

9. Budget information. What do you pay on average each month for the following expenses:

a. Rent/Mortgage

1 If you rent, please provide

a Monthly rent amount _____

b Security Deposit being held _____

c Name and Address of Landlord _____

2 If you have a mortgage, please provide

a Name and address of Mortgage Company _____

b Monthly payment _____

c Date and amount of purchase _____

d Current amount owed _____

e Current value of property _____

f Is your mortgage current (if no please provide the past due amount)

g Do you have any additional loans attached to the property (if yes, please provide the same information as above) _____

b. Insurance –

1 Home (in not included in payment) _____

2 DO you have life insurance (other than through payroll deductions)? If yes, please provide:

a Amount paid annually _____

b Name and address of insurer _____

c Type of policy (i.e. term, whole) _____

d Any cash value _____

3 Health (other than through payroll deduction) _____

4 Vehicle _____

c. Electric/ gas _____

d. Water/sewer/garbage _____

- e. Telephone service (cell or landline)
- f. Internet _____
- g. Cable _____
- h. Streaming services _____
- i. Food
 - 1 Groceries _____
 - 2 Dining out (includes fast food) _____
- j. Childcare _____
- k. Out of pocket children's education expense _____
- l. Clothing (purchases, laundry, drycleaning expenses) _____
- m. Personal care products/services _____
 Medical/ Dental expenses (Out of pocket monthly expenses such as prescriptions, regular debt payments, etc) _____
- n. Automobile maintenance expenses (gas /repairs) _____
- o. Entertainment (i.e. Movies, sports activities, bowling, etc) _____
- p. Charitable contributions (i.e. Church offerings, donations, etc) _____
- q. Car payments; Please list for each
 - 1 Year, make, model of vehicle _____
 Total payment each month _____
 - 2 Year, make, model of vehicle _____
 Total payment each month _____
 - 3 Year, make, model of vehicle _____
 Total payment each month _____
- r. Child support, if yes, please state: (if more than one case please provide information for each case)
 - 1 Amount paid each month _____
 - 2 Name and address of payee _____

 - 3 Arrearages _____
- s. Student loans _____
- t. Other – please specify _____

10. Summary of personal property – please describe briefly and estimate value (what you could sell it for or it would cost to replace with a like item if applicable)

- a. Household furnishings (please be as specific as possible) Estimated value \$ _____
 Description _____

- b. Electronics Estimated value \$ _____
 Description _____

- c. Clothing (Work, personal, children's?) Estimated value \$ _____

Description _____

d. Collections Estimated value \$ _____
Description _____

e. Motor vehicles; For each vehicle please provide: (if you have additional vehicles, please include on a separate sheet)

1 Year, make, model _____
2 VIN # _____
3 Mileage _____
4 Color _____
5 Condition (i.e Good, fair, etc) _____
6 Date and amount of purchase _____
7 Current amount owed _____
8 Payment terms (i.e. length of loan, monthly payment, interest rate, monthly payment date) _____

1. Year, make, model _____
2. VIN# _____
3. Mileage _____
4. Color _____
5. Condition (i.e Good, fair, etc) _____
6. Date and amount of purchase _____
7. Current amount owed _____
8. Payment terms (i.e. length of loan, monthly payment, interest rate, monthly payment date) _____

f. Cash on hand _____

g. Bank accounts (you must disclose all accounts your name is on) – For each account

1 Name and address of Institution _____

2 Type of Account (ie checking, savings, certificate of deposit _____
3 Name(s) on the account _____

4 Account number _____

1 Name and address of Institution _____

2 Type of Account (ie checking, savings, certificate of deposit _____
3 Name(s) on the account _____

4 Account number _____

h. Jewelry Estimated value \$ _____
Description _____

i. Retirement accounts. For each account, please provide:

- 1 Type of account (ie pension, 401K, 403B)
2 Name and address of Plan Administrator (who do you get your statements from)

3 Current value (vested) _____ (unvested if any) _____

j. Alimony, support, other maintenance debtor may be entitled to. IF any please provide:

- 1 Name and Address of payor _____

2 Monthly/ yearly payments _____
3 Please provide a copy of the order requiring the payments)

k. Income tax refunds to which you are entitled _____
(if you are entitled to the EIC please specify the amount of that portion) _____

l. Anyone who owes you any money, if yes, please provide

- 1 Name and address of your debtor _____

2 Reason for debt and amount owed to you _____

m. Personal property of any kind not listed Estimated value \$ _____
Description _____

Are you now, or have you ever been, represented by this firm? _____

1. In the Past 12 Months, have you repaid any money to any relatives or business partner? (if yes, please provide the following:

i Names and addresses of those you repaid _____

ii The amount and date you made the repayment _____

2. In the past 12 months, have you given any gifts of unusual sizes (\$200.00 to a family member or \$100.00 to a Charity), cumulatively? If yes, please provide:

i Names and addresses of those you gave gifts to

ii. The amount and date you made the gift

3. Has anyone ever sued you? If yes, please provide the Cause number and Creditor name:

4. Do you owe any of the following debts? Please be aware, in general these debts are not dischargeable in bankruptcy.

Student Loans Yes No

Taxes Yes No

Child Support Yes No

If yes, and even if you are current, the court requires the name and address of the custodial parent:

Name: _____

Address: _____

Alimony Yes No

Criminal fines Yes No

Personal Injury Yes No

Intentional Injury Yes No

Debts for fraud Yes No

IF your answers to any of the above questions is Yes (except for Student Loans), please provide details below and provide any documentation you have regarding these debts.

6. Have you filed all State and Federal Tax Returns for the previous four years? Yes No

If you have not, please provide the years and the reasons why you did not file your tax returns.

7. Do you understand that you are required to list all of your debts and all of your assets and give true and complete answers to all questions asked by the attorney or her staff? The attorney and his staff cannot give you permission to do otherwise. If they do, then you should retain another law firm. Yes No

8. Do you understand that the penalty for making a false statement in your bankruptcy petition and schedules is a fine of up to

\$500,000.00, or imprisonment for up to 5 years, or both?

Yes No

9. Do you understand that you are signing this document under the pains and penalties for perjury?
 Yes No

Debtor 1

Debtor 2

Printed name _____

Signature _____

Documents to provide our office:

1. Signed Retainer Agreement
2. Signed Initial Consultation Agreement
3. Tax returns for the past two years, including all schedules, W-2s, 1099s, etc.
4. Pay stubs for the past seven (7) months including year-to-date income prior to the date of filing as well as the paystubs up until the date of filing.
5. Documentation of any other income
6. Bank statements for the past three (3) months, plus additional Bank statements until the date of filing.
7. Any and all credit reports
8. Any and all statements regarding your debt (i.e. bills received in mail)
9. Name and address of any and all co-debtors
10. Information regarding any pending lawsuits
11. Information regarding any retirement accounts, such as pensions, 401k, etc.
12. Information regarding any prior bankruptcies
13. Information regarding all payments to creditors in the past 90 days
14. Copies of your state issued ID (i.e Driver's License) and social security card. If you do not have a copy of your social security card, you may use a W2 with your full social security number listed.