

# BANKRUPTCY INTAKE QUESTIONNAIRE

Appt Date:

Appt Time:

Attorney:

## 1. Personal Info:

YOU

SPOUSE

Name (first, middle, last):		
Other Names Used:		

Street Address:		
City, State, Zip:		
Mailing Address (if different)		
City, State, Zip:		

Email address:		
----------------	--	--

Home Phone:		
Cell Phone:		

How long have you lived in Oregon?		
------------------------------------	--	--

Social Security Number:		
-------------------------	--	--

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

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:  Yes  No

If yes, name of debtor: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Case Number: \_\_\_\_\_ Date Filed: \_\_\_\_\_

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:  Yes  No

(If yes, please attach a list and description of property)

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

Landlord Information:

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_