

THE VIDA LAW FIRM, PLLC
3000 Central Drive, Bedford, Texas 76021
Phone: (817) 358-9977 Fax: (817) 358-9988

Please tell us how you found out about our law firm (if you were referred, give us the name of the person, if you did an internet search let us know about the search):

First Name Middle Name Last Name Marital Status: (circle one)
S M D W

Spouse's First Name Middle Name Last Name

Street Address City, State, Zip County

Mailing Address (If different from residence address)

E-Mail Address Home Phone Number

Your Mobile Phone Number Spouse's Mobile Phone Number

Briefly, what caused you to get into your current financial situation? (Loss of employment, drop in income, illness, relationship problem, business problem, repossession, foreclosure, etc., explain):

A Message from the attorneys and staff of the Vida Law Firm:

Choosing the right attorney is very important. It is our goal at The Vida Law Firm to help reduce your stress in working through the decision to file bankruptcy. Clients generally have anxiety about providing personal information to an attorney not knowing why that information is relevant, needed or to what use it will be put. We assure you that the attorneys and the staff at our law firm seek information from you to enable the attorneys to provide you with the best legal advice based on the known facts. Having accurate and detailed information from a client is one of the most important requirements for providing legal advice to client. Your success in bankruptcy depends upon your involvement and honest disclosure.

GENERAL QUESTIONS

Circle Y or N. On this page, the term “you,” refers to and includes both you and your spouse.

1. **Y - N** Have you lived anywhere other than Texas in the last two years (730 days)? **If yes**, where and when: _____
2. **Y - N** Do you have any dependents living at home? **If yes**, list their ages, and relationship to you _____
3. **Y - N** Are you behind on child support or alimony? **If yes**, how much do you owe? _____
How much are your monthly court ordered child support or alimony payments? _____
4. **Y - N** Have you ever filed bankruptcy? **If yes**, when and what chapter? _____
Did you receive a discharge or was your case dismissed? _____
5. **Y - N** Have you transferred property to anyone in the past two years? (“Transfer” means to sell, give, or trade any real property (i.e., land, home, etc.) or personal property (i.e., vehicle, furniture, gun, etc.) to any person) _____
If yes, what property? _____ To whom? _____
6. **Y - N** Is there anyone you could sue for money damages? **If yes**, who? _____
Why? _____
7. **Y - N** Do you have an injury claim, auto accident claim, class action claim, medical malpractice claim, etc.? **If yes**, against whom? _____ Why? _____
8. **Y - N** Are you currently the beneficiary of a trust? **If yes**, explain _____
9. **Y - N** Are you an heir or beneficiary under any person’s will? **If yes**, is it in probate? _____
10. **Y - N** Are both of your parents living? If no, did the deceased parent(s) have a will? _____
If yes, is there anything in the estate of the deceased parent(s) that has not been distributed _____
11. **Y - N** Do you owe any debt to any family members or friends? _____
If yes, to whom? _____ How much? _____ Date of debt? _____
12. **Y - N** Have you made any payments to any family members or friends within one year of today? **If yes**, to whom? _____ How much? _____ Date(s) of payment (s)? _____
13. **Y - N** Within the past 90 days have you charged \$500.00 or more on a single credit card? _____
14. **Y - N** Within the past 90 days have you taken cash advances or written convenience checks totaling more than \$750? _____
If yes, how much? \$ _____, Why? _____
15. **Y - N** Do you own, or have an interest in ANYTHING, other than your home, the content of your home, your vehicles, tools of your trade, and your retirement accounts? _____
If yes, what and how much is it worth? _____
16. **Y - N** **Is First National Bank of Burleson one of your creditors?** _____

EMPLOYMENT INFORMATION

Please note: We request that you bring a copy of your last year’s income tax return and a copy of your two most recent pay stubs along with this client information sheet. If you are self-employed, please provide a year-to-date Profit and Loss Statement for your business.

Your Current Occupation How Long Your Employer's Name Full time or Part-time (circle one)

Spouse's Current Occupation How Long Spouse's Employer's Name Full time or Part-time (circle one)

Your SS# _____ Spouse’s SS# _____

INCOME INFORMATION FOR YOU AND YOUR SPOUSE IF APPLICABLE

Your Annual Gross Income (before deductions): \$ _____

How often do you get paid? (circle one) Weekly Every other Week Twice a Month Monthly

Spouse’s Annual Gross Income (before deductions): \$ _____

How often does your spouse get paid? (circle one) Weekly Every other Week Twice a Month Monthly

Do you or your spouse get overtime or bonuses? Yes ___ No ___ Amount \$ _____

Explain: _____

Do you or your spouse receive Social Security Benefits Yes ___ No ___ Amount \$ _____

Explain: _____

Do you or your spouse receive a Retirement or Pension Yes ___ No ___ Amount \$ _____

Explain: _____

Do you or your spouse pay or receive Child Support? Yes ___ No ___ Amount \$ _____

Explain: _____

Do you or your spouse receive any Rental Income? Yes ___ No ___ Amount \$ _____

Explain: _____

Do you or your spouse have any other income (VA, Royalties, Trust)? Yes _____ No _____

Explain: _____ Amount \$ _____

YOUR HOME/PROPERTY INFORMATION

IS YOUR HOME POSTED FOR FORECLOSURE? Yes No If Yes, when _____

Home Mortgage Company's Name (1st lien): _____

What's the value of your Home? _____ What is your monthly payment? _____

Are you behind? **Yes No** If Yes, how many months? _____ Do you want to keep your home? **Yes No**

How much is the pay-off? _____ Are taxes and insurance included in your home payment? **Yes No**

Is your Home a manufactured home? **Yes No** If yes, do you rent or own the land? _____

If you own the land, are you buying it under a mortgage, a contract for deed, or other? _____

Home Mortgage Company Name (2nd lien): _____

What's the value of your Home? _____ What is your monthly payment? _____

Are you behind? **Yes No** If Yes, how many months? _____ How much is the pay-off? _____

Do you own any rental property? Y N If yes, Mortgage Company's Name: _____

What's the value of the property? _____ What is the monthly payment? _____

Are you behind? **Yes No** If Yes, how many months? _____ Do you want to keep the property? **Yes No**

How much is the pay-off? _____ Are taxes and insurance included in the payment? **Yes No**

YOUR VEHICLE INFORMATION

ARE ANY OF YOU VEHICLES IN DANGER OF BEING REPOSSESSED Y N

1st Vehicle: Creditor's Name: _____ Year: _____ Make: _____ Model: _____

Miles: _____ Payoff: _____ Interest Rate: _____ Monthly Payment: _____ Purchase Date: _____

Duration of contract in month _____ Are you behind? _____ If yes, how many months? _____ Want to keep the vehicle? **Y N**

2nd Vehicle Creditor's Name: _____ Year: _____ Make: _____ Model: _____

Miles: _____ Payoff: _____ Interest Rate: _____ Monthly Payment: _____ Purchase Date: _____

Duration of contract in month _____ Are you behind? _____ If yes, how many months? _____ Want to keep the vehicle? **Y N**

3rd Vehicle Creditor's Name: _____ Year: _____ Make: _____ Model: _____

Miles: _____ Payoff: _____ Interest Rate: _____ Monthly Payment: _____ Purchase Date: _____

Duration of contract in month _____ Are you behind? _____ If yes, how many months? _____ Want to keep the vehicle? **Y N**

OTHER CREDITOR INFORMATION

Do you have any creditors whose claims are secured by a collateral such as recreational vehicle, furniture, appliances, above ground pool, stocks, bonds, etc.? Y - N If yes, for each creditor provide:

Creditor: _____ Collateral: _____ Total Debt: _____ Monthly Payment: _____ Interest: _____ Want to Keep? _____ Creditor:

_____ Collateral: _____ Total Debt: _____ Monthly Payment: _____ Interest: _____ Want to Keep? _____

Taxes owed: (circle where appropriate)

Creditor	Type of tax	Year/Quarter	Amount Due	Lien filed
IRS	1040, 940, 941, other	_____	\$_____	Yes - No
IRS	1040, 940, 941, other	_____	\$_____	Yes - No
IRS	1040, 940, 941, other	_____	\$_____	Yes - No
State	sales, other	_____	\$_____	Yes - No
County/City/ISD	real, personal, other	_____	\$_____	Yes - No

Have you filed all income tax returns that are due? _____ If no, what years have you not filed? _____

Estimated total of all other debts: Personal loans from Friends & Family: \$ _____ Student Loans: \$ _____

Credit cards: \$ _____ Judgments: \$ _____ Medical bills: \$ _____ Signature loans: \$ _____

ANY other debts or claims against you not listed above? Please list the amount and explain the debt or the claim:

