

Client Questionnaire

Section 1 Basic Information

REVISED 08.01.08

In order for us to complete your bankruptcy petition, you must complete this questionnaire with as much detail and accuracy as possible. All creditors must be listed with addresses, account numbers and exact balances. Also, please provide detailed information regarding your assets and how much you have made in the last six months. Failure to complete this questionnaire with all questions being answered in detail may delay the filing of your case.

Part A. Name and Address

Name: _____
Last First Middle

Telephone Number Home: _____ Work: _____

Have you used any other names in the past eight years? No Yes ***If yes, list other names:***

Social Security Number: ____ - ____ - ____

Address: _____

City: _____ State: _____ Zip: _____

County: _____

Have you lived at this address for at least 180 days? No Yes

Have you lived at this address for at least 730 days (2 years)? No Yes

If you answered no to either of the questions above, please list your previous address:

Address: _____

City: _____ State: _____ Zip: _____

County: _____

If you have a different mailing address, please list:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Part B. Name and Address of Spouse

If you are filing jointly with your spouse, fill in the following information about your spouse:

Name: _____
Last First Middle

Has your spouse used any other names in the past eight years? No Yes ***If yes, list other names:***

Social Security Number: ____ - ____ - ____

Address: ***(if different from your address):*** _____

City: _____ State: _____ Zip: _____ County: _____

If your spouse has a different mailing address, please list:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Part C. Prior/Pending Bankruptcy Cases

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

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? No Yes

If yes, name of debtor: _____ Relationship to you: _____

Case Number: _____ Date filed: _____ Judge: _____

In which district of which state was the case filed? _____

Exhibit "C" to the Voluntary Petition

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? No Yes (If yes, please attach a list and description of the property.)

Debtors Who Reside as Tenants of Residential Property

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

If yes, please provide the name and address of the landlord:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Section 2 Property

Part A. Real Estate (Schedule A)

List all real estate which you own or are a joint owner of, even if you still owe money on the property.

Address and description of property	Owned by Husband, Wife, Joint or Community	Value	Your % ownership, or \$ amount, if you and spouse are not sole owners	List all mortgages, home equity loans, and liens: What is the \$ value of the loan, lien or mortgage? What is your monthly payment? How many payments are left?	Who issued the lien, loan or mortgage? (Name, Address of Institution)	Office Use Only Exemptions?
Main residence Address						
Description of Residence # of bedrooms #of bathrooms Does the house need repairs?						
Second property (including rental or timeshares)						

Part B. Personal Property (Schedule B)

For each type of property listed below, indicate whether you own any property of that category, and, if you do, fill in the remaining information. You can think of the value as the replacement value. For property acquired for personal or family use, replacement value is the price a retail merchant would charge for a property of that kind, considering the age and condition of that property.

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Cash on hand					
Who do you bank with? BANK NAME <hr/> Checking/Savings Account, Certificates of deposit, other bank accounts		Account 1# Account 2# Account #3			
Security deposits held by utility companies, landlord					

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Household goods, furniture, including audio, video, and computer equipment		<p>Living Room:</p> <p>Dining Room:</p> <p>Kitchen:</p> <p>Bedrooms:</p> <p>Basement/Garage:</p> <p>Outdoor Furniture and accessories including lawn mower, tools, etc.</p> <p>Appliances:</p> <p>Electronic Equipment including TV's, VCR's or DVD player</p> <p>Computers:</p> <p>Other furniture:</p>			

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Books, pictures, art objects, records, compact discs, collectibles		Books: CDs: DVDs Collectibles:			
Clothing					
Furs and jewelry		Wedding Ring and Band: Other:			
Sports, photographic, hobby equipment, firearms		Guns: Digital Camera: Bikes:			
Interest in insurance policies-specify refund or cancellation value					
Annuities					
Interests in an education IRA, as defined in 26 USC § 530(b)(1)					

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Interests in pension or profit sharing plans					
Stock and interests in incorporated/ unincorporated business					
Interests in partnerships/joint ventures					
Bonds					
Accounts receivable					
Alimony/family support to which you are entitled					
Other liquidated debts owed to you, including tax refunds					
Equitable or future interests or life estates					
Interests in estate of decedent or life insurance plan or trust					
Other contingent/ unliquidated claims, including tax refunds, counterclaims					

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Patents, copyrights, other intellectual property					
Licenses, franchises					
Customer List or other compilation					
Automobiles, trucks, trailers, and accessories.		Car 1# Year/Make/Model/Miles Car 2# Year/Make/Model/Miles Car 3# Year/Make/Model/Miles			go to NADA.com for value
Boats, motors, and accessories					
Aircraft and accessories					
Office equipment, supplies					
Machinery, fixtures etc. for business					
Inventory					
Animals					

Type of Property	Yes / No	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only Exemptions?
Crops-growing or harvested					
Farming equipment and implements					
Farm supplies, chemicals, feed					
Other personal property of any kind not listed.					

Section 3 ➤ Debts

If you would prefer to type the creditor's names and addresses on a separate sheet of paper and attach it to the questionnaire, please do so and indicate it by putting a checkmark on the space below. Make sure that you list the name of the creditor and the collection agency and give us the complete address and account number for each debt. Remember if we do not get the address from you then we can not include it in your bankruptcy. WE CAN NOT TAKE YOUR ORIGINAL BILLS; PLEASE JUST ATTACH A LIST OF THE CREDITORS OR COMPLETE THE DEBT SECTION OF THIS QUESTIONNAIRE.

List is Attached _____

List below all debts that you owe, or that creditors claim that you owe.

Type of Debt	1. Creditor Name and Address 2. Account Number, if any 3. Date/range of dates when debt was incurred 4. Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Office Use Only	
					Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Home loans/ mortgages						
Car loan One (which vehicle)						
Car loan Two (which vehicle)						

Type of Debt	1. Creditor Name and Address 2. Account Number, if any 3. Date/range of dates when debt was incurred 4. Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Office Use Only	
					Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Other bank loans						
Personal loans						
Student loans						
Major credit card debts (Visa, Am Ex, Mastercard, Discover) - <i>continue on next page, if necessary</i>						

Type of Debt	1. Creditor Name and Address 2. Account Number, if any 3. Date/range of dates when debt was incurred 4. Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Office Use Only	
					Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Unpaid credit cards, (Visa, Am Ex, Mastercard, Discover) continued						
Department store credit card debts						
Other credit card debts (Gas cards, phone cards, etc.)						

Type of Debt	1. Creditor Name and Address 2. Account Number, if any 3. Date/range of dates when debt was incurred 4. Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Office Use Only	
					Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Unpaid medical bills						
Unpaid utility bills						
Unpaid rent						
Unpaid taxes						

Type of Debt	1. Creditor Name and Address 2. Account Number, if any 3. Date/range of dates when debt was incurred 4. Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Office Use Only	
					Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Unpaid alimony or child support	IMPORTANT: Even if you are current on child support, we need the address and address of the person you pay:					
Unpaid service fees						
All other unpaid debts/bills						

Section 4 Unexpired Leases and Contracts (Schedule G)

List below any leases or contracts that are still current that you are a party to. Include residential, car and business leases, and service or business contracts.

Nature and Description of Contract	Name and Address of Other Party or Parties	Date that Contract Expires
cell phone?		
apartment lease?		
car lease?		
other?		

Section 5 Current Income

Marital Status:

- Married
- Single
- Divorced
- Separated
- Widowed

List all dependents of you and your spouse, their ages, and their relationship to you:

Name	Age	Relationship

Part A. Debtor's Income

What is your occupation? _____

Name and address of your employer:

How long have you been employed there? _____

What is the gross amount of your paycheck, before taxes/other deductions are taken out? \$_____

How often do you get paid? once a week
 every two weeks twice a month
 once a month _____
 other _____

Complete the below questions with your estimate of monthly averages.

Do you receive overtime pay outside of your salary? If so, how much per month? \$_____

How much is taken out of each paycheck for taxes and social security? \$_____

How much is taken out for insurance? \$_____

How much for union dues? \$_____

10. Are there other deductions? If so, what are they and how much? _____

Do you receive income from business operations outside of your regular paycheck listed above? If so, what is the business and how much do you receive per month?

income from real estate property? If so, how much per month? No Yes \$_____

interest or dividends? If so, how much per month? No Yes \$_____

alimony or family support payments for your use or for the care of your dependents? If so, how much per month? No Yes \$_____

social security or other forms of monetary government assistance? No Yes \$_____

retirement or pension money? No Yes \$_____

Do you have any other sources of income not listed?

Are you or your spouse expecting any increase or decrease in salary next year? If so, explain.

Part B. Joint Debtor's Income

What is your spouse's occupation? _____

Name and address of your spouse's employer:

How long employed there? _____

What is the gross amount of your spouse's paycheck, before taxes/other deductions? \$_____

How often does your spouse get paid? once a week
 every two weeks twice a month once a month
 other _____

Complete the below questions with your estimate of monthly averages.

Does your spouse receive overtime pay outside of your salary? How much per month? \$_____

How much is taken out of each paycheck for taxes and social security? \$_____

How much is taken out for insurance? \$_____

How much for union dues? \$_____

10. Are there other deductions? If so, what are they and how much? _____

Does your spouse receive income from business operations outside of the regular paycheck listed above? If so, what is the business and how much does your spouse receive per month?

income from real estate property? If so, how much per month? No Yes \$_____

interest or dividends? If so, how much per month? No Yes \$_____

alimony or family support payments for spouse's use or for care of dependents? If so, how much per month? No Yes \$_____

social security or other forms of monetary government assistance? No Yes \$_____

retirement or pension money? No Yes \$_____

Does your spouse have any other income not listed?

Section 5A Current Monthly Income (Debtor)

(This form is extremely important. Complete by listing all gross income (not your net but gross) for the last six months; Numbers must come off of a paycheck stub or pay history from your employer)

Fill in your monthly income for the categories below in the column labeled "Month 1." If your income for one of the below categories varies from month to month, complete the below chart by entering in your income for all six months.

	Month 1 (last month) ____/____	Month 2 (2 months ago) ____/____	Month 3 ____/____	Month 4 ____/____	Month 5 ____/____	Month 6 ____/____	Office Use Only
Gross wages, salary, tips, bonuses, overtime, commissions.							
Income from operation of business: a. Gross Income - b. Expenses = c. Net Income.							
Rent and other real property income: a. Gross Income - b. Expenses = c. Net Income.							
Interest, dividends, and royalties.							
Pension and retirement income (<i>NOT Social Security</i>).							
Regular contributions from others to the household expenses, including child support.							
Unemployment Compensation.							
Social Security income.							

DEBTOR'S SPOUSE (COMPLETE FOR SPOUSE EVEN IF SHE/HE IS NOT FILING)

Fill in your monthly income for the categories below in the column labeled "Month 1." If your income for one of the below categories varies from month to month, complete the below chart by entering in your income for all six months.

	Month 1 (last month) ___/___	Month 2 (2 months ago) ___/___	Month 3 ___/___	Month 4 ___/___	Month 5 ___/___	Month 6 ___/___	Office Use Only
Gross wages, salary, tips, bonuses, overtime, commissions.							
Income from operation of business: a. Gross Income - b. Expenses = c. Net Income.							
Rent and other real property income: a. Gross Income - b. Expenses = c. Net Income.							
Interest, dividends, and royalties.							
Pension and retirement income (<i>NOT Social Security</i>).							
Regular contributions from others to the household expenses, including child support.							
Unemployment Compensation.							
Social Security income.							

Section 6 Current Monthly Expenses

Do you and your spouse maintain separate households? No Yes. If so, fill one page out for your household and another for your spouse's.

The following questions ask for your expenses each month. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.), write in the amount and the frequency that you pay the amount.

Indicate how much you pay for each item each month

your rent or your home mortgage \$ _____

Does that amount include real estate taxes? No Yes

Does it include property insurance? No Yes

electricity and heating \$ _____

water and sewage \$ _____

telephone service/long distance \$ _____

Do you have any other utility bills? If so, what, and how much per month?

_____ \$ _____

_____ \$ _____

_____ \$ _____

home maintenance, including repairs and general upkeep \$ _____

food \$ _____

clothing \$ _____

laundry and dry cleaning \$ _____

medical and dental expenses \$ _____

transportation (not including car payments) \$ _____

entertainment, recreation, newspapers, magazines \$ _____

charitable contributions \$ _____

insurance not deducted from paycheck

homeowner's or renter's insurance \$ _____

life insurance \$ _____

health insurance \$ _____

auto insurance \$ _____

other insurance _____ \$ _____

taxes not deducted from paycheck \$ _____

installment payments for car, furniture, etc. (Specify)

_____ \$ _____

_____ \$ _____

_____ \$ _____

alimony, maintenance, support paid to others \$ _____

payments for support of dependents not living at home \$ _____

expenses from operation of business \$ _____

Additional Expenses (707(b) Expenses)

mandatory payroll deductions not already listed _____ \$ _____

_____ \$ _____

_____ \$ _____

court ordered payments not already listed _____	\$ _____
_____	\$ _____
_____	\$ _____
education necessary to maintain employment	\$ _____
education for a physically or mentally challenged child	\$ _____
childcare	\$ _____
disability insurance (if not listed on line 14)	\$ _____
health savings accounts	\$ _____
care for elderly, chronically ill, or disabled family members	\$ _____
protection from family violence	\$ _____
education expense for your children under 18	\$ _____
non-mandatory contributions to retirement accounts (including loan repayment)	
_____	\$ _____
_____	\$ _____
other expenses not listed above _____	\$ _____
_____	\$ _____
_____	\$ _____

BUSINESS INCOME AND EXPENSES

(COMPLETE ONLY IF YOU ARE SELF EMPLOYED)

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE
information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ _____

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income \$ _____

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor) \$ _____

4. Payroll Taxes _____

5. Unemployment Taxes _____

6. Worker's Compensation _____

7. Other Taxes _____

8. Inventory Purchases (Including raw materials) _____

9. Purchase of Feed/Fertilizer/Seed/Spray _____

10. Rent (Other than debtor's principal residence) _____

11. Utilities _____

12. Office Expenses and Supplies _____

13. Repairs and Maintenance _____

14. Vehicle Expenses _____

15. Travel and Entertainment _____

16. Equipment Rental and Leases _____

17. Legal/Accounting/Other Professional Fees _____

18. Insurance _____

19. Employee Benefits (e.g., pension, medical, etc.) _____

TOTAL EXPENSES _____

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract
item 22 from item 2) \$ _____

QUESTIONS REGARDING YOUR PERSONAL FINANCIAL SITUATION OVER THE LAST TWO YEARS

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under chapter 12 or 13, and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

If you have no information to report for a question, check the "NONE" box.

Income from employment

State your gross income from employment. If you have not received an income from employment during the **two years** immediately preceding this calendar year, check this box:

NONE

Period	\$ Amount	Source	Husband/Wife
--------	-----------	--------	--------------

January 1 of this year through
date of commencement of case

YTD gross income for 2008 before taxes _____
(look at your paystub)

Last year, (January 1 - December 31)

2007 income (look at your tax returns) _____

The year before last,
(January 1 - December 31)

2006 income (look at your tax returns) _____

Income other than from employment or operation of business

State the amount of income received other than from employment or operation of business during the **two years** immediately preceding the commencement of this case:

NONE

Period	\$ Amount	Source	Husband/Wife
--------	-----------	--------	--------------

3. Payments to creditors

If your debts are primarily consumer debts, list all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor made within **90 days** immediately preceding the commencement of this case. Indicate with an asterisk (*) any payments that were made on account of a domestic support obligation, or that were made as part of an alternative repayment plan.

NONE

Name and Address of Creditor	Dates of Payments	Amount paid	Amount still owed
------------------------------	-------------------	-------------	-------------------

c. *All debtors.* List all payments made within **one year** immediately preceding the commencement of this case to creditors who were "insiders". ("Insiders" include your relatives, your business partners and their relatives, your corporations, or your affiliates.)

NONE

<u>Name and Address of Creditor and Relationship to You</u>	<u>Dates of Payments</u>	<u>Amount Paid</u>	<u>Amount Still Owed</u>
---	--------------------------	--------------------	--------------------------

4. Suits, executions, garnishments and attachments

a. List all suits and administrative proceedings to which you are or were a party within **one year** preceding the filing of this case.

NONE

<u>Caption of Suit and Case Number</u>	<u>Nature of Proceeding</u>	<u>Court or Agency and Location</u>	<u>Status or Disposition</u>
--	-----------------------------	---	----------------------------------

b. Describe all property that has been garnished, seized, or attached under any legal or equitable process within **one year** immediately preceding the commencement of this case.

NONE

<u>Name and Address of Person/Company for Whom the Property Was Seized (Creditor)</u>	<u>Date of Seizure</u>	<u>Description and Value of Property</u>
---	------------------------	--

5. Repossessions, foreclosures, and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller, within **one year** immediately preceding the commencement of this case.

NONE

<u>Name and Address of Creditor</u>	<u>Date of Repossession, Foreclosure, Transfer or Return</u>	<u>Description and Value of Property</u>
-------------------------------------	--	--

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case.

NONE

<u>Name and Address of Assignee</u>	<u>Date of Assignment</u>	<u>Terms of Assignment/Settlement</u>
-------------------------------------	---------------------------	---------------------------------------

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case.

NONE

<u>Name and Address of Custodian</u>	<u>Name and location of Court, Case Title and Number</u>	<u>Date of Order</u>	<u>Description and Value of Property</u>
--	--	--------------------------	--

Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.

NONE

<u>Name and Address of Recipient</u>	<u>Relationship to You, if Any</u>	<u>Date of Gift</u>	<u>Description and Value of Gift</u>
--	------------------------------------	-------------------------	--

Losses

List all losses from fire, theft, gambling or other casualty within **one year** immediately preceding the commencement of this case **or since the commencement of this case**.

NONE

<u>Description and Value of Property</u>	<u>Description of Circumstances and Amount Covered by Insurance, if Any</u>	<u>Date of Loss</u>
--	---	---------------------

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consultation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of the case.

NONE

<u>Name and Address of Payee</u>	<u>Date of Payment</u>	<u>Name of Person Who Paid, if Not You</u>	<u>Amount of Money/ Description and Value of Property</u>
----------------------------------	------------------------	--	---

Other transfers (including sale of your property)

a. List all other property, other than property transferred in your ordinary course of business or financial affairs, transferred either absolutely or as a security within **two years** immediately preceding the commencement of this case.

NONE

<u>Name and Address of Transferee and Relationship to you</u>	<u>Date of Transfer</u>	<u>Description of Property Transferred and Value Received</u>
---	-------------------------	---

b. List all property you transferred within **10 years** immediately preceding the commencement of this case to a self-settled trust, or a similar device of which you are the beneficiary.

NONE

<u>Name of Trust or Similar Device</u>	<u>Date of Transfer</u>	<u>Amount of Money or Description and Value of Property or Interest</u>
--	-------------------------	---

Closed financial accounts

List all financial accounts and instruments held in your name or for your benefit which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case.

NONE

Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing
---------------------------------	--	------------------------------------

Safe deposit boxes

List each safe deposit or other box or depository in which you have or have had securities, cash, or other valuables within **one year** immediately preceding commencement of this case.

NONE

Name and Address of Bank or Other Depository	Name and Address of Those With Access to Box or Depository	Description of Contents	Date of Transfer, if Any
--	--	-------------------------	--------------------------

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within **90 days** preceding the commencement of this case.

NONE

Name and Address of Creditor	Date of Setoff	Amount of Setoff
------------------------------	----------------	------------------

Property held for another person

List all property that you hold or control that is owned by another person.

NONE

Name and Address of Owner	Description and Value of Property	Location of Property
---------------------------	-----------------------------------	----------------------

15. Prior address of debtor

If you have moved within the **three years** immediately preceding the commencement of this case, list all residences during the last three years, excluding your present address.

NONE

16. Spouses and Former Spouses

If you reside or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **eight-year period** immediately preceding the commencement of the case, identify the name of your spouse and of any former spouse who resides or resided with you in the community property state.

NONE

Name _____

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

a. List the name and address of every site for which you received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NONE

<u>Site Name and Address</u>	<u>Name and Address of Governmental Unit</u>	<u>Date of Notice</u>	<u>Environmental Law</u>
------------------------------	--	-----------------------	--------------------------

b. List the name and address of every site for which you provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NONE

<u>Site Name and Address</u>	<u>Name and Address of Governmental Unit</u>	<u>Date of Notice</u>	<u>Environmental Law</u>
------------------------------	--	-----------------------	--------------------------

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which you are or were a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NONE

Name and Address of <u>Governmental Unit</u>	<u>Docket Number</u>	<u>Status or Disposition</u>
---	----------------------	------------------------------

18 . Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NONE

Name	Taxpayer I.D. Number(EIN)	Address	Nature of Business	Beginning and End Dates of Operation
------	------------------------------	---------	--------------------	---

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NONE

<u>Name</u>	<u>Address</u>
-------------	----------------

The following question is only to be answered if you are a corporation or partnership or if you have been, in the six years immediately preceding this case, an officer, director, managing executive, or owner of more than 5% of the voting securities of the corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or otherwise self-employed.

19. Books, records, and financial statements

a. List all bookkeepers and accountants who, within the **two years** immediately preceding the filing of this bankruptcy case, kept or supervised the keeping of books of account and records.

NONE

Name and Address	Dates Services Rendered
<hr/>	

DATE OF COMPLETION: _____

DEBTOR: _____

DEBTOR: _____