

Ginsberg Law Bankruptcy Analysis Worksheet

Please complete and fax to 770-393-0240 or email to ginsberg.bankruptcy @ gmail.com. Your submission of and our receipt of this worksheet does not create an attorney-client relationship.

Name: _____

Street address: _____

City: _____ State: _____ Zip: _____

(H) Phone: _____ (W) Phone: _____ (Cell ph.) _____

Email: _____ Number of people living in your home: _____

Debts:

Tax debts:

IRS: _____
(total debt) (tax years)

Georgia Revenue: _____
(total debt) (tax years)

Real estate

Home value: _____ When purchased: _____

First mortgage : _____

Monthly payment: \$ _____ Delinquency total: \$ _____

Mortgage payoff: \$ _____

Second mortgage : _____

Monthly payment: \$ _____ Delinquency total: \$ _____

Mortgage payoff: \$ _____

Motor vehicles

Type of car/truck #1: _____
Year Make Model Mileage

Monthly payment: \$ _____ Delinquency total: \$ _____

Loan payoff: \$ _____

Type of car/truck #2: _____
Year Make Model Mileage

Monthly payment: \$ _____ Delinquency total: \$ _____

Loan payoff: \$ _____

Credit cards and medical bills

Total credit card debt: \$ _____

Total medical bills: \$ _____

Other debts

_____	_____
_____	_____
_____	_____
_____	_____

Income:

Your annual income: _____

Spouse's annual income: _____

Have you ever filed bankruptcy before? If so, on what date and was it a Ch. 7 or 13?
