

A. REAL PROPERTY (Home):

- (1) Do you own real estate that you use as your home? YES ____ NO ____ . Describe and give the location of this property (house, mobile home, condominium, cooperative, land, etc.) in which you hold an interest:

- (2) Co-owners: _____

- (3) Purchase price: _____ Date purchased: _____

- (4) Original mortgage amount: _____ Downpayment amount: _____

- (5) Have you used any funds that you did not borrow to purchase or improve your home? YES __ NO __ . If YES, list the amounts and give details: _____

- (6) If not purchased, state when and how you became the owner (inheritance, gift, etc.): _____

- (7) Present value of your house: _____

- (8) Outstanding mortgage balance: _____

- (9) Are there any other mortgages? YES ____ NO ____ . If YES, give the name and address of each company:

- (10) Is any mortgage insured by the FHA, VA, or a private mortgage insurance company?

YES ____ NO ____ . If YES, give details: _____

B. REAL PROPERTY (Other Real Estate):

- (1) Do you own other real estate? YES ____ NO ____ . Describe and give the location of all real property (lot, house, condominium, cooperative, land, burial plot, etc.) in which you hold an interest:

- (2) Co-owners: _____

- (3) Outstanding mortgage balance: _____

- (4) Name of mortgage company: _____

- (5) Purchase price: _____ Year purchased: _____

- (6) Present value of your house: _____

- (7) Are there any other mortgages? YES __ NO __ . If YES, give the name and address of each company:

- (8) Is any mortgage insured by the FHA, VA, or a private mortgage insurance company?

YES ____ NO ____ . If YES, give details: _____

C. PERSONAL PROPERTY:

- (1) Cash on hand: \$ _____
- (2) Do you have any deposits of money in banks, savings and loan associations, or credit unions? If YES, list the name and address of the bank, savings and loan association, or credit union, and the amount:

- (3) Have you given a security deposit to any landlord, utility, or anyone else? YES ____ NO _____. If YES, list the name and address of the person or company and the amount:

- (4) List the number and types of rooms for which you have furnishings. For example, "furnishings for two bedrooms, living room, dining room and kitchen." And then list the value of everything.

<i>Number and Type of furnished rooms</i>	<i>Value (What You Could Get for It If You Sold It)</i>
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List any collectibles within these rooms separately: Value (What you could get for it if you sold it)

If any of the above items are being financed through a company, list the item and the name and address of the company below: _____

- (5) Give an estimate of the value (what you could get for it if you sold it) of the following:
All your furniture not already listed: \$ _____ All your clothing: \$ _____ All minor appliances not already listed: \$ _____ All your household goods not already listed (dishes, utensils, food, etc.): \$ _____
- (6) List each item of jewelry that you own, and an estimate of its value (what you could get for it if you sold it):

D. CARS, MOBILE HOMES, TRAILERS AND BOATS:

Do you have any cars, trucks, mobile homes, boats, trailers, or motorcycles? YES ____ NO _____. If YES, give the year, make, model, value, who is financing it, and amount owed:

E. OTHER PROPERTY:

Do you own any life insurance policies? YES ____ NO ____.

If YES, list insurance company's name and address: _____

How long have you had each policy? _____

Cash surrender value: _____

Do you have any other insurance, including credit insurance? YES ____ NO ____ . If YES, describe:

Do you expect to receive any money from any insurance in the near future? YES ____ NO ____ . If YES, give details: _____

Do you own any stocks? YES ____ NO ____ . Value: \$ _____

Do you own any bonds (including U.S. Savings Bonds)? YES ____ NO ____ . Value: \$ _____

Do you own any machinery, tools, or fixtures used in your business or work? YES ____ NO ____ . If YES, list and state what you could sell it for: _____

Do you have any animals or pets? YES ____ NO ____ . If YES, describe and give value (what you could sell them for): _____

Do you have any right to receive commissions or other payments from any previous job you have held? YES ____ NO ____ . Does anyone owe you any money? YES ____ NO ____ . If YES to either, state names, addresses and amounts owed: _____

Do you have any books, prints or pictures, stamps or coins, or sports equipment of substantial value? YES ____ NO ____ . If YES, describe and estimate their value: _____

Do you have any stock in trade (inventory)? YES ____ NO ____ . If YES, describe and estimate the value: _____

Do you own anything else not mentioned above? YES ____ NO ____ . If YES, describe and state its value (what you could sell it for): _____

Does any of the property that you own or possess pose a threat of harm to public health or safety?

YES _____ NO _____.

Is the threat imminent? YES _____ NO _____.

Has anyone ever alleged that any of the property that you own or possess poses a threat of imminent harm to public health or safety? YES _____ NO _____.

Was the threat alleged to be imminent? YES _____ NO _____.

Give details regarding any threat or alleged threat to public health or safety, including identification of property and nature of potential harm or alleged harm. _____

27. Budget Information:

A. Do you currently receive your pay or other income (check one):

	YOU	YOUR SPOUSE
WEEKLY	_____	_____
EVERY 2 WEEKS	_____	_____
MONTHLY	_____	_____
OTHER	_____	_____

B. What is the gross amount received in wages or other income (before taxes or other deductions)?

YOU	YOUR SPOUSE
_____	_____

C. What deductions, if any, are taken out?

	YOU	YOUR SPOUSE
Taxes	_____	_____
Insurance	_____	_____
Union dues	_____	_____
Other (identify: _____)	_____	_____

D. What is the usual amount of your check (take-home pay)?

YOU	YOUR SPOUSE
_____	_____

E. Is your job subject to seasonal or other changes?

YOU	YES _____	NO _____
YOUR SPOUSE	YES _____	NO _____

F. What was your gross income (reported on W-2 form and tax return) for last year?

YOU

YOUR SPOUSE

G. If you receive alimony, maintenance, or support, what is the amount you get on a regular basis?

YOU

YOUR SPOUSE

H. List all dependents of you and your spouse.

	NAME	AGE	RELATIONSHIP
YOU	_____		
.	_____		
.	_____		
YOUR SPOUSE	_____		
.	_____		
.	_____		
.	_____		

I. List all members of your household.

NAME	AGE	RELATIONSHIP

J. Do you expect your income to increase or decrease in the next year? YES ____ NO _____. If YES, describe:

K. Do you expect to have any increase or decrease in expenses (like medical bills) in the near future?

YES ____ NO _____. If YES, describe: _____

- L.** Do you, your spouse, or your dependents receive income from any source other than jobs, alimony, maintenance, or support listed above (such as public assistance, unemployment compensation, social security, SSI, pension, etc.)? YES _____ NO _____. If YES, list:

Source of Income

To Whom Payable

Amount per Month

- M.** Do you, your spouse, or your dependents receive any regular contributions to your household expenses from any source not listed above? YES _____ NO _____. If YES, list:

Source of Contribution

To Whom Payable

Amount per Month

- N.** Is your family eligible for food stamps? YES _____ NO _____. If YES, how much in food stamps do you receive per month? \$_____