

""BAKER & ASSOCIATES

Thank you for completing the following form. We realize the information asked for is confidential, but in order for our firm to give you the best recommendation for your particular situation, please complete the form fully and accurately. If you do not know exact figures, please complete the blank with your best estimate. This information will be maintained in confidence and will not be released or disclosed to anyone without your consent.

If you run out of space, keep typing and the font will automatically shrink to fit the blank.

DATE: _____
NAME: _____ DATE OF BIRTH _____
SPOUSE'S NAME: _____ DATE OF BIRTH _____
ADDRESS: _____ Zip Code _____
CITY _____ COUNTY _____ SS#(H): _____ SS#(W): _____

How did you hear about us?
TV _____ Greensheet _____
Mailout _____ Yellow Pages _____
VC _____ Referral _____
Internet _____ Other _____

Do you have any children living at home? (Name, Age): _____

PERSONAL INFORMATION:

Home Phone: _____ E-mail Address: _____
Cell Phone (H): _____ Occupation: _____
Work Phone (H): _____ Length of Employment: _____
Employer (H): _____ Self employed? Y N
Cell Phone(W): _____ Occupation: _____
Work Phone (W): _____ Length of Employment: _____
Employer (W) _____ Self employed? Y N

Marital Status: Married _____ Single _____ Divorced _____ Separated _____

Do you own your home or do you rent? Own Rent

How long have you lived in Texas? _____

Have you ever filed Bankruptcy? _____ If so, when? _____ Where? _____
When was it dismissed or discharged? _____

Is your home posted for foreclosure? (Yes / No _____) Foreclosure Date _____

Are you behind in house or rent payments? (Yes / No _____) How much? \$ _____

Do you owe the IRS? Yes No How much? \$ _____

Do you owe property taxes? Yes No How much? \$ _____

Do you owe your homeowners association? Yes No How much? \$ _____

Do you owe on student loans? Yes No How much? \$ _____

Are you behind in child or spousal support? Yes " No " How much? \$ _____

Do you have any insufficient funds checks outstanding? Yes No How much? \$ _____

Do you have any co-signers on any of your debts? Yes No

Have you filed all income tax returns for this year and previous years? Yes No

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SECURED DEBTS

Home Loans:

Mortgage Co. _____ Mthly. Pmt. \$ _____
Balance Due: \$ _____ Amt. Behind: \$ _____ Value: \$ _____
Interest rate: _____ Fixed _____ Adjustable _____ Escrow for taxes and insurance? Y N

Mortgage Co. _____ Mthly. Pmt. \$ _____
Balance Due: \$ _____ Amt. Behind: \$ _____ Value: \$ _____
Interest rate: _____ Fixed _____ Adjustable _____ Escrow for taxes and insurance? Y N

Vehicles (List all vehicles you own, whether there is a debt against them or not)

Auto Creditor: _____ Year/Make: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P
Date purchased: _____ Mileage: _____ Full coverage insurance? Y N # of Pmts Behind _____
Trade in on purchase of vehicle? Y N If repossessed, date of repossession: _____

Auto Creditor: _____ Year/Make: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P
Date purchased: _____ Mileage: _____ Full coverage insurance? Y N # of Pmts Behind _____
Trade in on purchase of vehicle? Y N If repossessed, date of repossession: _____

Auto Creditor: _____ Year/Make: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P
Date purchased: _____ Mileage: _____ Full coverage insurance? Y N # of Pmts Behind _____
Trade in on purchase of vehicle? Y N If repossessed, date of repossession: _____

Do you have any recreational vehicles, motorcycles, boats, trailers, vehicles, etc.?

Creditor: _____ Year/Make: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P
of Pmts Behind _____

Creditor: _____ Year/Make: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P
of Pmts Behind _____

Loans for the purchase of furniture, appliances, stereo, etc. or loans for which you have pledged household items as collateral.

Creditor: _____ Collateral: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P AV
of Pmts Behind _____

Creditor: _____ Collateral: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P AV
of Pmts Behind _____

Creditor: _____ Collateral: _____ Office Use Only
Balance Due: \$ _____ Payments: \$ _____ Value: \$ _____ PM NPM/P AV
of Pmts Behind _____

Are your wages now being garnished or are they about to be garnished? Yes _____ No _____

Details: _____

Do you have any judgments against you?: Yes _____ No _____ Who? _____

Do you have any lawsuits against you?: Yes _____ No _____ Who? _____

Do you own any real property (lots, land, burial plots, etc. - in Texas or any other state or country) OTHER THAN the house you live in now? Yes _____ No _____ If so, please describe: _____

Is any creditor currently taking any deductions out of your paycheck for loans, car payments, etc.? Yes _____ No _____

Do you have any savings accounts, CD's, stocks, bonds or other financial accounts? Yes _____ No _____
If so, please describe and list dollar value amount: _____

Do you have an IRA, §401(k) retirement plan, §529 college plan, or other retirement accounts? Yes _____ No _____
If so, please describe and list dollar value amount: _____

Are you currently in the process of getting a divorce, or are you separated from your spouse? Yes _____ No _____

Have you been divorced in the past 10 years one or more times? Yes _____ No _____

Do you have any child support obligations or alimony obligations? Yes _____ No _____
If so, are you current on your payments or behind? Current Yes No If behind, how much? \$ _____

Have you co-signed on a loan or credit account for anyone else? Yes _____ No _____

Do you have a stockbroker's license or a securities license? Yes _____ No _____

Have you received any cash advances from your credit cards (not payday loans) in the last 6 months? Yes _____ No _____
If yes, approximately how much? \$ _____

Have you purchased any luxury goods or services (for over \$600) on your credit cards in the last 6 months? Yes _____ No _____
If yes, approximately how much have you spent? \$ _____

Has anyone attempted to collect a debt from you or any member of your family in a manner that has been offensive, aggressive or you believe may be wrong? Yes _____ No _____
Details: _____

Have you or any member of your family been injured, hurt or wronged as a result of an action of someone else or by someone else's property or things? Yes _____ No _____
Details: _____

Have you or any member of your family lost any money in any investments, stocks, bonds or ventures as a result of bad advice, incorrect advice, or mismanagement by others? Yes _____ No _____
Details: _____

Has anyone misrepresented anything to you or any member of your family that has caused any damage or loss? Yes _____ No. _____
Details: _____

Have you or any member of your family had any property or assets that have been damaged by someone (not you or your family)? Yes _____ No. _____
Details: _____

Do you or any member of your family have any problems or concerns that are not described above that our firm might assist you with? Yes _____ No. _____
Details: _____

UNSECURED DEBTS: (ALL OTHER DEBTS)

List all debts even if you dispute them or they may have been “written off” by a creditor, including credit cards, medical debts, personal loans, bad checks, etc.

<i>NAME OF CREDITOR</i>	<i>BALANCE OWED</i>	<i>MONTHLY PAYMENT</i>	<i>LAST PAYMENT DATE</i>	<i>PAYMENTS BEHIND</i>
Credit Cards				
Medical Debts				
Payday loans				
Deficiencies on other debts				
Student education loans				
Others				

MONTHLY INCOME

Your annual salary (without deducting for taxes or other deductions) \$ _____
 Spouse's annual salary (without deducting for taxes or other deductions) \$ _____
 Your total monthly take home pay \$ _____
 Spouse's monthly take home pay \$ _____
 Other monthly income (odd jobs, second job, child support, food stamps, rental income, family contribution, etc.) \$ _____

MONTHLY EXPENSES

Approximate expense amounts will be sufficient.

TYPE OF EXPENSE	DEBTOR	<i>office use</i>
House payment or rent (include lot rental)	\$ _____	\$ _____
Utilities: Electricity and heating fuel (gas/propane company)	\$ _____	\$ _____
Water and sewer	\$ _____	\$ _____
Telephone (including cellular phone and long distance)	\$ _____	\$ _____
Cablevision	\$ _____	\$ _____
Garbage pickup	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Home maintenance	\$ _____	\$ _____
Food	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Laundry & dry cleaning	\$ _____	\$ _____
Medical & dental expenses (not already taken out of a paycheck)	\$ _____	\$ _____
Transportation & car expenses (gas/repairs/maintenance/cab or bus fare)	\$ _____	\$ _____
Insurance: House or renter's (if not included in house payment)	\$ _____	\$ _____
Life and disability	\$ _____	\$ _____
Health and dental (not already taken out of a paycheck)	\$ _____	\$ _____
Car / Truck	\$ _____	\$ _____
Property	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Taxes: Income tax or withholding tax payments	\$ _____	\$ _____
Current real estate taxes	\$ _____	\$ _____
Estimated income tax payments (quarterly)	\$ _____	\$ _____
Overdue real estate taxes	\$ _____	\$ _____

TYPE OF EXPENSE	DEBTOR	<i>office use</i>
Installment payments:		
Motor vehicle: _____	\$ _____	\$ _____
Motor vehicle: _____	\$ _____	\$ _____
Motor vehicle: _____	\$ _____	\$ _____
Rental property	\$ _____	\$ _____
Furniture	\$ _____	\$ _____
Jewelry	\$ _____	\$ _____
Boat / recreational vehicle	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony & child support	\$ _____	\$ _____
Child care	\$ _____	\$ _____
Student loans	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____