

NANCY SPENCER GRIGSBY, STANDING CHAPTER 13 TRUSTEE

**Complete both sides of this Questionnaire and mail it to 185 Admiral Cochrane.
#240, Annapolis, MD 21401 with all required documentation listed in the attached
letter no less than 7 days prior to your 341 Meeting of Creditors.**

*This fully completed form must be mailed to the Trustee **7 days** prior to your first meeting of creditors.*

Case Number: _____ Today's Date: _____

Your Name(s) _____
(Debtor) (Joint Debtor)

Addresses: _____
(Street Address) (Street Address)

(City, State, Zip code) (City, State, Zip Code)

Phone No. (____) _____ (____) _____

Marital Status (circle one): Married & Living Together Separated Divorced Single Widow(er)

I have _____ (number) of dependents living with me.

If paying child or spousal support: Amount per month \$ _____

Were payments current on bankruptcy filing date? Yes/No

Amount behind \$ _____

I am (circle one): **renting** or **buying** my home and I **have** or **have not** paid my mortgage/rent this month.

I am paying for the following _____ (number) of motor vehicles (**LIST ALL**) with insurance coverage as indicated:

1. Make & Model _____ Insurance Company _____

2. Make & Model _____ Insurance Company _____

3. Make & Model _____ Insurance Company _____

Name(s) and Address(es) of Employer(s) (Payroll office)

Debtor:

Joint Debtor:

I am paid: monthly, twice/month, every 2 weeks, weekly

I am paid: monthly, twice/month, every 2 weeks, weekly

(name of employer)

(name of employer)

(street address)

(street address)

(city, state, zip code)

(city, state, zip code)

Phone Number: _____

Phone Number: _____

When my plan is confirmed, the monthly wage deduction will come from: debtor / joint debtor / both (circle one)

Tax Returns: Have you filed tax returns, **both** State and Federal for the most recent tax year and **ALL** prior years? Yes / No

If your answer is no: list the years (if you had an obligation to file) that were not filed: _____

Do you expect to or did you receive a tax refund in 2015? Amount \$ _____ (Federal) \$ _____ (State)
in 2014? Amount \$ _____ \$ _____

Contributions/Loan Repayments to RETIREMENT PLANS:

How much do you contribute monthly to charitable organizations? \$ _____

How much have you contributed to charitable organizations over the last 2 years? \$ _____

Immediately prior to filing this bankruptcy, I was CONTRIBUTING TO a retirement plan: Yes / No
(Including, but not limited to: pension, profit sharing, annuity, IRA, TSP, ESOP, 401K, 403B, 457, etc.)

TODAY, I am no longer making such contributions: Yes / No

TODAY, I am contributing to a retirement plan (Type: _____) \$ _____ per pay period.

Immediately **prior to filing** this bankruptcy, I was REPAYING A LOAN FROM a retirement plan: Yes / No

1. Amount borrowed: \$ _____ When: _____ Balance Due: \$ _____

2. Amount borrowed: \$ _____ When: _____ Balance Due: \$ _____

(attach a copy of the monthly/quarterly statement for each loan to this questionnaire)

TODAY, I am no longer making such repayments: Yes / No

TODAY, I am repaying a loan or loans from a retirement plan: (Type: _____) \$ _____ per pay period

Have you remembered to gather copies of ALL of the documents the Trustee requested in the enclosed letter to mail with this questionnaire?

I declare under penalty of perjury that I have read the answers contained in the above Trustee's questionnaire and that they are true and correct.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. 152 and 3571.

Signed: _____

Dated: _____

Signed: _____

Dated: _____