

**Office Use Only:**

Chapter: \_\_\_\_\_

Quote: \_\_\_\_\_

**Evans Law Offices**

*Attorneys at Law*

CLIENT INFORMATION  
**(PLEASE FILL OUT BOTH SIDES)**

DATE: \_\_\_\_\_ TYPE OF CASE: \_\_\_\_\_

NAME: \_\_\_\_\_ SPOUSE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY ZIP CODE

HOME PHONE: ( ) \_\_\_\_\_ WORK PHONE: ( ) \_\_\_\_\_

CELL PHONE: ( ) \_\_\_\_\_ SPOUSE'S CELL PHONE: ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ SPOUSE'S EMAIL: \_\_\_\_\_

SSN: CLIENT: \_\_\_\_\_ SPOUSE: \_\_\_\_\_

DOB: CLIENT: \_\_\_\_\_ SPOUSE: \_\_\_\_\_

EMPLOYER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

SPOUSE'S EMPLOYER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

NAME OF FRIEND OR RELATIVE **NOT** LIVING WITH YOU: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY ZIP CODE

HOME PHONE: ( ) \_\_\_\_\_ WORK/CELL PHONE: ( ) \_\_\_\_\_

HOW DID YOU HEAR ABOUT THE LAW FIRM? OTHER: \_\_\_\_\_

Please fill out to the best of your ability. (Estimates are ok)

FINANCIAL INFORMATION

(BANKRUPTCY CLIENTS)

**Prior Cases:**

Yes / No

Year Case filed: \_\_\_\_\_

Chapter: \_\_\_\_\_

Case No: \_\_\_\_\_

County Filed: \_\_\_\_\_

Have you met with an attorney regarding this matter?

Yes / No

**Unsecured Debt:** (No Collateral)

Number of Credit Cards: \_\_\_\_\_; Cards over 10k: \_\_\_\_\_

\$ \_\_\_\_\_

Medical Bills: \_\_\_\_\_

\$ \_\_\_\_\_

Cash Advances: \_\_\_\_\_

\$ \_\_\_\_\_

Personal Loans/Other Unsecured Debt: \_\_\_\_\_

\$ \_\_\_\_\_

Any Pending Lawsuits? \_\_\_\_\_

**Purchases made within last 90 days:**

\$ \_\_\_\_\_

**Tax Debt and Student Loans**

Total Federal Income Tax Debts: \_\_\_\_\_

\$ \_\_\_\_\_

Years Owed: \_\_\_\_\_

Total State Income Tax Debts: \_\_\_\_\_

\$ \_\_\_\_\_

Years Owed: \_\_\_\_\_

Other Tax Debts: \_\_\_\_\_

\$ \_\_\_\_\_

Type of Tax: \_\_\_\_\_

Did you file last year's tax return?

Yes / No

Total Refund/Owing: \_\_\_\_\_

\$ \_\_\_\_\_

Student Loans: (Total)

\$ \_\_\_\_\_

**Secured Debts**

Vehicle Loan No. 1 – Balance Owing: \_\_\_\_\_

\$ \_\_\_\_\_

Make, Model & Year of vehicle: \_\_\_\_\_

Market Value: \$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

Are payments current? Yes / No

Amount/Months behind: \_\_\_\_\_

**Other Secured Debt:** Balance Owing: \_\_\_\_\_

\$ \_\_\_\_\_

Collateral Description: \_\_\_\_\_  
\_\_\_\_\_

Please fill out to the best of your ability. (Estimates are ok)

**Real Estate Loans**

Residence – Address: \_\_\_\_\_  
\_\_\_\_\_

Market Value: \$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

Are payments current? Yes / No Amount/Months behind: \_\_\_\_\_

Other Real Property – Address: \_\_\_\_\_  
\_\_\_\_\_

Fair Market Value: \$ \_\_\_\_\_

**Other Assets:**

Cash on Hand (Checking/Savings): \$ \_\_\_\_\_

Value of Stocks and Mutual Funds: \$ \_\_\_\_\_

Value of Pension/Retirement: \$ \_\_\_\_\_

Vehicles owned free and clear: \_\_\_\_\_  
\_\_\_\_\_

(Year, Make, Model) \_\_\_\_\_  
\_\_\_\_\_

Are you suing someone? Yes / No

**Gross Monthly Income:** \$ \_\_\_\_\_

**Estimated Living Expenses:** \$ \_\_\_\_\_

(Excluding monthly payments on debts listed above)

CONSULTATION AGREEMENT AND ACKNOWLEDGEMENT  
OF RECEIPT OF DISCLOSURES AND INSTRUCTIONS

This Agreement is entered into on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by and between \_\_\_\_\_, (hereinafter referred to as the "Client" whether on or more and Evans Law Offices. (Hereinafter the "Attorney")

Client has requested the opportunity to consult with and obtain information and advice from the Attorney regarding obtaining relief from debts, and other relief provided through the bankruptcy process. This agreement is for purposes of **consultation only**. If at the end of the initial consultation the parties agree that Attorney is to provide any services short of being retained to file a bankruptcy, the parties shall attach an addendum to this contract setting for the additional services that Attorney is to provide the Client the Obligations of the Client and the Attorneys fees for such services if the Client retains the Attorney to file a bankruptcy, the parties shall execute a separate contract setting forth the fees and other terms of such representation. With respect to the consultation, the parties agree as follows:

1. The Attorney(s) will provide **ONE** free consultation (excluding previous bankruptcy cases).
2. Attorney(s) shall provide the Client the following services.
  - A. Analyze the Client's financial circumstances based on information provided by the client.
  - B. To the extent possible based on the information provided by the Client, advise the Client of the Client's bankruptcy and non-bankruptcy options.
  - C. If the Client has not provided the Attorney with sufficient information upon which to fully advise Client on the Client's Options, inform the Client what information the Client needs to provide to enable the Attorney to provide such advise and information.
  - D. Advise the Client of the requirements places upon Client to file a Chapter 7, 13, or Chapter 11 Case.
  - E. To the extent possible, quote the Client an estimate fee for the Attorney(s) services to provide bankruptcy assistance or other legal services to the Client.
3. The Client acknowledges that the first date upon which the Attorney has first offered to provide any bankruptcy assistance is the date, and that the Attorney provided the Client with the "Notice to Clients who Contemplates Filing Bankruptcy", the statement mandated by Section 527 (b) of the Bankruptcy Code, and the "Instructions of Providing Information Required to File Bankruptcy", copies of which are attached to this Consultation Agreement.

Client Initials \_\_\_\_\_

Client Initials \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Client

Date: \_\_\_\_\_

\_\_\_\_\_  
Client

Date: \_\_\_\_\_

\_\_\_\_\_  
Brette L. Evans