



SAEDI & WELLS, LLC: CLIENT CONSULTATION FORM

This intake form must be completed **IN FULL** before an attorney can meet with you to review your case. In order for us to determine the best course of action we must have complete information. This form does not create an attorney client relationship.

Name: _____
 First Middle Last

Address: _____
 Street Apartment Number

_____ City State Zip Code

Have you lived in Georgia for the last 6 months? YES NO

Have you lived in Georgia for the last 730 days (2 years)? YES NO

If no, where? _____

Maiden Name/ Former Name _____

Social Security Number: _____ Date of Birth: _____

Home Phone Number: _____ Work Phone Number: _____ Cell Number: _____

Emergency Contact Person and Number: _____ Phone Number: _____

*If filing jointly, spouse's full name _____ and social security number: _____

Spouse's Maiden Name/ Former Name _____

*If you have lived less than 2 years at your home address, please list previous addresses beginning with the most recent:

_____ Dates: _____

_____ Dates: _____

Have you **EVER** filed for bankruptcy in the past 8 years (even if it was dismissed or discharged)? YES NO

If YES, Please list all prior bankruptcies:

| Type | State | Date Filed | Case Number | Dismissed or Discharged? |
|------|-------|------------|-------------|--------------------------|
| | | | | |
| | | | | |

Has your spouse **EVER** filed for bankruptcy in the past 8 years (even if it was dismissed or discharged)? YES NO

If yes, when was their case filed and what is the current status of the case? _____

WHAT IS THE REASON FOR FILING (Circle One):

FORECLOSURE GARNISHMENT REPOSSESSION DEBT CONSOLIDATION CREDIT CARDS

How did you hear about Saedi & Wells? FRIEND FORMER CLIENT YELLOW PAGES LETTER INTERNET

How much did you and your spouse earn from employment during the following years:

| Year | You | Spouse |
|-----------------------------|-----|--------|
| 2007 Income | | |
| 2008 Income | | |
| 2009 Income (through today) | | |

If you **PAY** child support, how much do you pay? _____

If YES, please list their name and mailing address: _____

If you pay child support, are you current? YES NO If no, how far behind are you? _____

PLEASE NOTE: IF YOU PAY OR ARE REQUIRED TO PAY COURT ORDERED CHILD SUPPORT, YOU MUST PROVIDE THE NAME AND ADDRESS OF THE PERSON AND/OR AGENCY COLLECTING OR RECEIVING THE CHILD SUPPORT ON THE ATTACHED LIST OF CREDITORS. ONLY PAST DUE AMOUNTS AS OF THE DATE THAT YOU FILE YOUR BANKRUPTCY CASE CAN BE PAID THROUGH YOUR BANKRUPTCY PLAN. YOU CANNOT WIPE OUT CHILD SUPPORT PAYMENTS!

IF YOU ARE SELF-EMPLOYED PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. What is the name of your business? _____
2. How long have you operated your business? FROM _____ TO _____.
3. Is your business incorporated or are you a sole proprietor? PLEASE CIRCLE ONE
4. If incorporated, what kind of corporation are you? LLC C Corp (regular corporation) or S Corp
5. What is your Employer Identification Number (EIN): _____
6. If your business is incorporated, who are the shareholders of the company? (please provide the name, address, and ownership percentage of each shareholder) _____

7. Who handles your day to day bookkeeping? (please provide name AND address) _____
8. Who prepares your annual tax returns? (please provide name and address) _____
9. Does your business have any business equipment? **YES** **NO**
10. If you answered YES to question 5, please list all business equipment and there fair market value:

ASSET INFORMATION

How many houses or pieces of land do you own or are in the process of purchasing? _____

PLEASE NOTE: IN ORDER FOR A BANKRUPTCY TO STOP AN EVICTION OR FORECLOSURE, YOUR NAME MUST BE ON THE TITLE TO THE PROPERTY OR ON THE APARTMENT LEASE AGREEMENT.

Please list all houses or property that you have or on which you are a co-signer:
 → LIST ALL MORTGAGES (1st, 2nd, 3rd ect...) ON ALL PROPERTY

Property #1 Address: _____

| | | | |
|--|-------------------|------------------|-------------------|
| First Mortgage Name & Address | _____ | | |
| | Payoff amount: \$ | Amount behind:\$ | What is worth? \$ |
| Second Mortgage Name & Address | _____ | | |
| | Payoff amount: \$ | Amount behind:\$ | What is worth? \$ |
| Names of <u>ALL</u> people listed on the title to the property | _____ | | |

Property #2 Address: _____

| | | | |
|--|-------------------|------------------|-------------------|
| First Mortgage Name & Address | _____ | | |
| | Payoff amount: \$ | Amount behind:\$ | What is worth? \$ |
| Second Mortgage Name & Address | _____ | | |
| | Payoff amount: \$ | Amount behind:\$ | What is worth? \$ |
| Names of <u>ALL</u> people listed on the title to the property | _____ | | |

LIST ALL BANKRUPTCIES THAT THE ABOVE LISTED PROPERTIES HAVE BEEN INVOLVED IN THE PAST SIX YEARS. THIS INCLUDES ALL BANKRUPTCIES INVOLVING CO-DEBTORS OR OTHER PEOPLE LISTED ON THE TITLE.

Have you transferred (e.g. sold, given, or otherwise transferred title) any land, houses, cars, or other property to anyone in the last two years? YES NO.

If yes, please tell us when you transferred the property, to whom you transferred the property, their mailing address and what you received in exchange for the property: _____

Have you made any purchases on your credit cards in the last six months? YES NO

*If you answered YES to the previous question, please discuss these purchases with your attorney.

PLEASE NOTE THAT IF YOU HAVE AN ACCOUNT WITH A CREDIT UNION OR ANOTHER FINANCIAL INSTITUTION WHERE YOU ALSO HAVE AN OUTSTANDING LOAN YOU SHOULD NOT KEEP ANY FUNDS IN THAT ACCOUNT DUE TO THE FACT THAT THESE FUNDS MAY BE FROZEN HAS A RESULT OF FILING BANKRUPTCY.

If you sold all of your furniture at a garage sale, how much would you get? _____

If you sold all of your clothes at a garage sale, how much would you get? _____

| Type of Property | Yes/ No | Description & Location | Value |
|---|------------|------------------------|-------|
| 1. Cash on hand | | | |
| 2. Checking/Savings Account, Certificates of deposit, other bank accounts | | | |
| 3. Books, pictures, art objects, records, compact discs, collectibles | | | |
| 4. Furs and jewelry | | | |
| 5. Sports, photographic, hobby equipment, firearms | | | |
| 6. Annuities | | | |
| 7. Interests in an education IRA, as defined in 26 USC § 530(b)(1) | | | |
| 8. Interests in pension or profit sharing plans | | | |
| 9. Bonds | | | |
| 10. Boats, motors, and accessories | | | |
| 11. Office equipment, supplies | | | |

Please provide the following information on all vehicles you have (including vehicles on which you are only a co-signer) whether they are paid for or not, and please indicate if you are purchasing or leasing the vehicle:

| | <u>Year/ Make/Model</u> | <u>Int. Rate</u> | <u>Balance</u> | <u>Date Leased/ Purchased</u> | <u>Monthly Payment</u> | <u>Address of creditor if financing</u> |
|--------|-------------------------|------------------|----------------|-------------------------------|------------------------|---|
| Car #1 | | | | | | |
| Car #2 | | | | | | |
| Car #3 | | | | | | |

PLEASE NOTE: IF YOU ARE LEASING A VEHICLE, YOU CAN ONLY PUT THE AMOUNT YOU ARE BEHIND AS OF THE DATE YOU FILE YOUR BANKRUPTCY CASE. YOU MUST CONTINUE TO MAKE YOUR REGULAR MONTHLY PAYMENTS DIRECTLY TO THE CREDITOR.

If you are a Chapter 7 client and owe more than your car is worth please ask the attorney about the Redemption Process is which you can refinance your loan at a much better rate or trade your car in for another vehicle while in Chapter 7.

PLEASE CIRCLE ANY OF THE FOLLOWING WHICH APPLY TO YOU:

- Receive child support
- Pay child support
- Receive alimony
- Pay alimony
- Have been sued
- Sued someone else
- Wages garnished
- Wages levied by government
- Bank accounts frozen or garnished
- Loss of tax refund due to debt
- Previous repossession
- Previous foreclosure
- Sold land or property within 2 years
- Receive food stamps
- Receive government assistance

PLEASE CIRCLE IF YOU HAVE ANY OF THE FOLLOWING:

- Checking account
- Savings account
- Credit union account
- Deductions from check for savings
- 401K plan
- 401K loan (How much paid per month? \$_____)
- Retirement Benefits
- Annuities
- Collector's items/antiques
- Stocks
- Bonds
- Recreational vehicles
- Business equipment
- Jewelry
- Furs
- Firearms

Have you been in an accident or do you have an injury for which you have filed, plan to file or could file a personal injury suit? YES NO

PLEASE NOTE: FAILURE TO DISCLOSE A LAWSUIT OR A POTENTIAL LAWSUIT TO WHICH YOU ARE A PARTY COULD RESULT IN THE DISMISSAL OF YOUR BANKRUPTCY CASE OR COULD CAUSE ALL OF YOUR MONEY YOU MAY RECOVER IN A SETTLEMENT SUIT TO GO TO YOUR BANKRUPTCY CASE. IF YOU HAVE A LAWSUIT OR A POTENTIAL LAWSUIT, PLEASE DISCUSS THIS ISSUE WITH YOUR ATTORNEY. IF YOU FAIL TO NOTIFY THE ATTORNEY, YOUR NONDISCLOSURE MAY BAR THE CASE FROM PROCEEDING IN STATE COURT.

If you are suing someone, are being sued by someone, or expect to sue or be sued by someone, please list the reason for the lawsuit, the name of the other party, and the amount you expect to get from the lawsuit if you are suing someone else.

In the last two years, have you received, or do you expect to receive in the future, a settlement from a lawsuit or an insurance company, any gift of money, land, or property (over \$500), or an inheritance of any kind? YES NO

If you answered yes to the question above, please describe what you received and from whom you received it.

Are you currently in divorce proceedings? YES NO

If yes, please provide the name and telephone number of your attorney:

If you have another attorney for ANY reason, including a lawsuit, please provide the name and telephone number and the reason that they are representing you:

CHAPTER 7 FILERS-----IF YOU ARE FILING A CHAPTER 7 CASE, IT IS YOUR RESPONSIBILITY TO NOTIFY YOUR ATTORNEY OF ANY CHANGES IN YOUR FINANCIAL CIRCUMSTANCES OR LEGAL MATTERS (such has pending personal injury lawsuits, auto accidents, inheritance, or other change in circumstance) UPON PAYMENT OF BALANCE DUE. IF YOU FAIL TO NOTIFY THE ATTORNEY, YOUR NONDISCLOSURE MAY PREVENT YOU FROM RECEIVING A POTENTIAL AWARD OR SETTLEMENT.

Creditor Information

You are **REQUIRED** by law to list **EVERYONE** that you owe in your bankruptcy. You cannot choose to list some creditors and not list others. Please list below everyone that you owe with a complete address which you received within the last 90 days. **YOU** are responsible for providing a **complete and correct address** which the creditor provided you in writing with the last 90 days. Any creditor not listed on this form will not be included in your bankruptcy and you will be responsible for paying that creditor. You **MUST** list **ALL CREDITORS** on this page. If you need additional forms, please let the attorney know.

| Name and Address and Account Number of Creditor (Most current from the last 90 days) | Amount Owed | Co-signer (ADDRESS included) or any other person who may be responsible for this debt. | Type of Debt (please circle one) |
|--|-------------|--|---|
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |

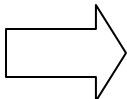


If would like to have our firm pull all 3 credit reports the fee is \$50 per individual and \$70 for joint filers.

Creditor Information

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|--|-------------|--|---|
| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |
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| | | | Credit card Loan Vehicle Mortgage Rental/Lease Medical Bill Other |



If would like to have our firm pull all 3 credit reports the fee is \$50 per individual and \$70 for joint filers.

Current Income

Marital Status:

- Married
- Single
- Divorced
- Separated
- Widowed

List all dependents of you and your spouse, their ages, and their relationship to you:

| Name | Age | Relationship |
|------|-----|--------------|
| | | |
| | | |

Part A. Your Income

What is your occupation? _____
 How long have you been employed there? _____
 Name and address of your corporate payroll:

Part B. Your Spouse's Income (needed even if they are not filing)

What is your spouse's occupation? _____
 How long have they been employed there? _____
 Name and address of their employer:

FOR VERIFICATION PURPOSES:

Payroll contact name: _____
 Payroll contact number: _____

What is the gross amount of your paycheck, before taxes/other deductions are taken out? \$ _____

How often do you get paid (circle one)?
 Once a month Twice a month Every week

Do you receive:

- a) Overtime? If so, how much per month? \$ _____
- b) Income from business income outside of your regular paycheck listed above? If so, how much do you receive per month? \$ _____
- c) Income from real estate property? If so, how much per month? No Yes \$ _____
- d) Interest or dividends? If so, how much per month? No Yes \$ _____
- e) Alimony or family support payments for your use or for the care of your dependents? If so, how much per month? No Yes \$ _____
- f) Social security or other forms of monetary government assistance? No Yes \$ _____
- g) Food stamps: No Yes \$ _____
- h) Retirement or pension money? No Yes \$ _____

Deductions taken from EACH pay check:

Social security/Fed and State Taxes: \$ _____
 Insurance: \$ _____
 Dental: \$ _____
 Pension: \$ _____
 Child Support: \$ _____
 401K contribution: \$ _____
 401K loan repayment: \$ _____
 *What is the balance? \$ _____
 Union dues: \$ _____
 Other deductions: \$ _____

What is the gross amount of thier paycheck, before taxes/other deductions are taken out? \$ _____

How often do they get paid (circle one)?
 Once a month Twice a month Every week

Do they receive:

- i) Overtime? If so, how much per month? \$ _____
- j) Income from business income outside of their regular paycheck listed above? If so, how much do you receive per month? \$ _____
- k) Income from real estate property? If so, how much per month? No Yes \$ _____
- l) Interest or dividends? If so, how much per month? No Yes \$ _____
- m) Alimony or family support payments for their use or for the care of their dependents? If so, how much per month? No Yes \$ _____
- n) Social security or other forms of monetary government assistance? No Yes \$ _____
- o) Food stamps: No Yes \$ _____
- p) Retirement or pension money? No Yes \$ _____

Deductions taken from EACH pay check:

Social security/Fed and State Taxes: \$ _____
 Insurance: \$ _____
 Dental: \$ _____
 Pension: \$ _____
 Child Support: \$ _____
 401K contribution: \$ _____
 401K loan repayment: \$ _____
 *What is the balance? \$ _____
 Union dues: \$ _____
 Other deductions: \$ _____

Current Monthly Income

If your and/or your spouse's income has NOT BEEN THE SAME for the past 6 months then you are required to fill in your monthly income for the categories below in the column labeled "Month 1."

| | Month 1 (last month) ___/___ | Month 2 ___/___ | Month 3 ___/___ | Month 4 ___/___ | Month 5 ___/___ | Month 6 ___/___ |
|---|------------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| Gross wages, salary, tips, bonuses, overtime, commissions. | | | | | | |
| Income from operation of business: | | | | | | |
| Rent and other real property income: | | | | | | |
| Pension and retirement income (NOT Social Security). | | | | | | |
| Regular contributions from others to the household expenses, including child support. | | | | | | |
| Unemployment Compensation. | | | | | | |
| Social Security income. | | | | | | |
| Other sources not already mentioned. Specify: | | | | | | |

Do you currently having any leases? (apartment, car, boat, Aaron's rental, ect...) YES NO

If yes, who is lease with and what are the terms of the lease?

Do you have any student loans? YES NO

If Yes, what is the status of these loans? Deferment Default Currently repaying at \$_____ per month.

AVOIDING CONFLICTS OF INTERESTS

Our law firm has represented many clients in the Atlanta area over the past several years. In very rare cases, we must decline to accept a case because of a potential conflict of interest with another person or former client. For example, we would not be able to represent you if you are currently engaged in litigation with another of our clients.

1. Are you presently married: _____ Spouse's name: _____
2. Has your spouse ever filed for bankruptcy? _____
3. Are you currently involved in a divorce or child custody case? _____
4. Name of former spouse: _____
5. Have you ever filed a lawsuit against anyone? _____ If yes, who? _____
6. Has anyone ever sued you? _____ If yes, who? _____

OUR OFFICE VERIFIES ALL EMPLOYMENT INFORMATION SUPPLIED IN THIS PETITION. IF THE INFORMATION IS NOT CORRECT WE WILL NOT FILE YOUR CASE UNTIL THE CORRECT INFORMATION IS PROVIDED.

Please sign and date below to acknowledge that you have read and understand the above information and that all the information you have provided is correct to the best of your knowledge.

Applicant Signature

Attorney's Signature

Date

Date

Monthly Household Budgetary Information

The court requires that we present an accurate reflection of the TOTAL monthly expenses of your household. We cannot process your case without this information and the court will not accept your petition without this information. If you are self-employed and operate your own business you **must** ALSO fill out the business expenses section on the right hand side.

| Household expenses | Business Expenses (Fill this out only if self employed) |
|------------------------------|--|
| Rent/mortgage payments _____ | _____ |
| Second Mortgage _____ | |

(If you are NOT sure about your payment amount please LET US KNOW and provide us with the LAST statement you received)

ARE YOUR INSURANCE AND REAL ESTATE TAXES INCLUDED IN YOUR MORTGAGE? YES NO

| | |
|--|-------|
| Electric bill _____ | _____ |
| Gas bill _____ | _____ |
| Water/sewer _____ | _____ |
| Telephone _____ | _____ |
| Cable TV _____ | _____ |
| Home maintenance _____ | _____ |
| Food _____ | _____ |
| Clothing _____ | _____ |
| Laundry/dry cleaning _____ | _____ |
| Medical/dental _____ | _____ |
| Gasoline/bus fare _____ | _____ |
| Entertainment _____ | _____ |
| Charity/church _____ | _____ |
| Homeowners/renter's insurance _____ | _____ |
| Life insurance _____ | _____ |
| Health insurance (not deducted from pay) _____ | _____ |
| Auto insurance _____ | _____ |
| Car Lease Payment _____ | _____ |
| Alimony _____ | _____ |
| Child support paid out _____ | _____ |
| Child care expenses _____ | _____ |
| Homeowner Association Fees _____ | _____ |
| 401K Loan Repayment _____ | _____ |
| Student Loan Payment _____ | _____ |

Additional Expenses (707(b) Expenses)

| | |
|---|----------|
| Education necessary to maintain employment | \$ _____ |
| Education for a physically or mentally challenged child | \$ _____ |
| Childcare | \$ _____ |
| Disability insurance | \$ _____ |
| Health savings accounts | \$ _____ |
| Care for elderly, chronically ill, or disabled family members | \$ _____ |
| Protection from family violence | \$ _____ |
| Education expense for your children under 18 | \$ _____ |
| Non-mandatory contributions to retirement accounts (including loan repayment) | \$ _____ |
| Other expenses not listed above | \$ _____ |

I, THE UNDERSIGNED, HEREBY ATTEST AND AFFIRM THAT ALL DEBTS, WHETHER JOINT DEBTS, CO-SIGNED DEBTS, CLAIMS OR LAWSUITS FOR COLLECTION OF DEBTS, WHETHER DISPUTED OR NOT, HAVE BEEN LISTED ON MY QUESTIONNAIRE. I ACKNOWLEDGE THAT MY ATTORNEYS RELY ON THE INFORMATION PROVIDED IN THIS QUESTIONNAIRE IN ORDER TO ASSIST AND ADVISE ME, AND THAT IT IS MY RESPONSIBILITY TO PROVIDE MY ATTORNEYS WITH REGARD TO ANY INCOMPLETE INFORMATION CONTAINED HEREIN. I ACKNOWLEDGE THAT I UNDERSTAND THAT BEFORE MY CASE CAN BE FILED AND I AM OFFICIALLY REPRESENTED BY SAEDI & WELLS, I MUST COMPLETE THE CLIENT INTAKE FORM COMPLETELY, PAY ALL REQUIRED FEES, PROVIDE ALL REQUIRED PRE-FILING INFORMATION AND SIGN ALL REQUIRED DOCUMENTS. I FURTHER ACKNOWLEDGE THAT IN THE EVENT A CREDITOR IS OMITTED FROM ANY BANKRUPTCY PETITION FILED BY MY ATTORNEYS AS A RESULT OF AN OMISSION ON THIS QUESTIONNAIRE, I WILL NOT HAVE THE PROTECTION OF THE BANKRUPTCY COURT FROM ACTIONS BY THAT CREDITOR.

DATE: _____ SIGNATURE _____

DATE: _____ SIGNATURE _____

PERMISSION TO DISCUSS YOUR CASE

I _____ do hereby authorize Saedi & Wells, LLC to discuss my case with the following person(s):

DATE: _____ SIGNATURE _____

DATE: _____ SIGNATURE _____

BECAUSE IT IS IMPORTANT THAT WE VERIFY CONTACT WITH ALL CLIENTS PLEASE PROVIDE THE FOLLOWING INFORMATION:

E-MAIL ADDRESS (PLEASE PRINT CLEARLY)

CELL PHONE:

Because correspondence sent via the internet can be verified we prefer to use this method to ensure that you are receiving our notices. All court notices will be sent via US mail. Copies of all documents will be sent to this address.

IF YOU HAVE A REPOSSESSED VEHICLE, A PENDING REPOSSESSION, A PENDING FORECLOSURE, EVICTION OR YOU HAVE A JUDGMENT/GARNISHMENT YOU **MUST** PROVIDE US WITH THE NAME AND PHONE NUMBER OF THAT COMPANY. FAILURE TO PROVIDE OUR OFFICE WITH THIS INFORMATION WILL RESULT IN A **DELAY** OF PROCESSING YOUR CASE.

Mortgage Company **Attorney's** Name, Phone Number, FAX number and Address:

Creditor address and phone number that is holding a judgment and/or a garnishment or has repossessed your car:

IF YOU ARE FILING A CHAPTER 7 & PLANNING ON KEEPING YOUR CAR OR HOME YOU MUST PROVIDE OUR OFFICE WITH THE CREDITOR'S PHONE NUMBER AND YOUR ACCOUNT NUMBER:

Phone number: _____ Account number: _____

IF YOU ARE FILING A CHAPTER 13 AND YOU HAVE BEEN IN A BANKRUPTCY IN THE LAST 12 MONTHS PLEASE STATE WHY YOUR LAST CASE WAS DISMISSED:

