

INFORMATION STATEMENT FOR INDIVIDUALS

The information contained in this document will be treated as privileged and confidential information, intended only for the use in account(s) being collected by Constantino Law Office, P.C. This is an attempt to collect a debt, and any information obtained will be used for that purpose only.

PERSONAL INFORMATION

- 1. Name _____
- 2. Other names or aliases _____
- 3. Home Phone _____ Cell Phone _____
- 4. Social Security Number _____
- 5. Date of Birth _____
- 6. Marital Status _____
- 7. Spouse's Name _____
- 8. Spouse's SSN _____ Date of Birth _____
- 9. Home Address _____
- 10. Own/Rent _____ How Long _____
- 11. Landlord name, address, Phone # _____

	<u>Balance</u>	<u>Monthly Pmt.</u>	<u>Current?</u>
1 st Mort./Rent _____			
2 nd Mort. _____			

- 12. Fair Market Value: \$ _____
- 13. Name, address, phone # of next of kin or other reference.

- 14. Relationship _____
- 15. Previous addresses (last 5 years)

16. Age and relationship of dependents living in your household (exclude self and spouse):

<u>Name</u>	<u>Age</u>	<u>Relationship</u>

- 17. Last filed income tax return _____
- 18. Number of exemptions claimed _____
- 19. Adjusted gross income _____

EMPLOYMENT INFORMATION

20. Your Employer or Business

<u>Name</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____

21. How long employed _____ years _____ months \$_____ per: hour/month/year

22. *Circle appropriate description:* Full-Time or Part-Time

Paydays Salary/wage Wage Earner Partner Sole proprietor

23. List all other sources of Income, and how much:

Child Support _____

SSI _____

Disability _____

Other _____

SPOUSE'S EMPLOYMENT INFORMATION

24. Spouses Employer or business

<u>Name</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____

25. How long employed _____ years _____ months \$_____ per: hour/month/year

26. *Circle appropriate description:* Full-Time or Part-Time

Paydays Salary/wage Wage Earner Partner Sole proprietor

GENERAL FINANCIAL INFORMATION

27. **Bank Accounts, LIST ALL** (checking, savings, IRA, retirement plans, CD's, etc)

<u>Name of Bank</u>	<u>City/State</u>	<u>Type of Account</u>	<u>Account No.</u>	<u>Balance</u>

28. ACCOUNTS RECEIVABLE (Bank Charge Cards & Other Credit Cards)

<u>Name of Financial Institution</u>	<u>Monthly Payment</u>	<u>Credit Limit</u>	<u>Amount Owed</u>	<u>Credit Available</u>	<u>Type of Account Or card</u>
Wells Fargo Bank	\$50.00	\$2500	\$1200	\$500	Credit Card (example)

29. REAL PROPERTY (Any property you have ownership with)

Address, description, ownership type (*JT/Sole/TS) FMV: _____

Mortgage Balance _____

Monthly Payment _____

Current? YES NO

Total Owing _____

30. List all **Vehicles**, registered to you *and/or* your spouse

	<u>Model</u>	<u>Make</u>	<u>Year</u>	<u>License</u>	<u>Amount Owed</u>	<u>Monthly Payment</u>
1.						
2.						
3.						

Name & address of Lien holder(s) _____

31. Name of all businesses in which you have an ownership interest, address, nature of the interest, partners' names, etc.

32. Judgment creditors:

Name

Amount Owed

Payment per month

33. Other information relating to your financial condition. If you circle the "yes" box, please give dates and explanation under additional information, the next question.

a. Court proceedings YES NO

b. Bankruptcies YES NO

c. Recent transfer of assets for less than full value YES NO

d. Repossessions YES NO

e. Anticipated increase in income YES NO

f. Participant or beneficiary to trust, estate, profit sharing, etc. YES NO

34. Additional information

35. If you are not going to pay this judgment in full today, what sort of **Monthly Payment or Settlement Offer** would you like to propose to pay to the Plaintiff?

Certification. Under penalty of perjury, I declare that this statement of assets, liabilities, and other information is true, correct, and complete.

Your signature(s) _____ Date _____