

DATE:

CONSULTATION QUESTIONNAIRE

Submit

HOW DID YOU HEAR ABOUT US?

- RADIO (STREAMING)
- RADIO
- INTERNET
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- FRIEND
- OTHER



5703 RED BUG LAKE ROAD
SUITE 353
WINTER SPRINGS, FL 32708
DIRECT: 321.872.7220
OFFICE: 321.872.7573
FACSIMILE: 321.222.9573
EMAIL: DIVINNE@DBJOSEPHFIRM.COM

Civil Status:

☐ Married

☐ Single

☐ Other

CLIENT

Full Name _____

Mailing Address _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Occupation _____

Employer _____

Previous Bankruptcy _____

Date _____

Dependants _____

Names and Ages _____

SPOUSE

Full Name _____

Mailing Address _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Occupation _____

Employer _____

Previous Bankruptcy _____

Date _____

Dependants _____

Names and Ages _____

BANK SAVINGS/CHECKING ACCOUNT: _____

TAX REFUNDS DUE WHICH YOU HAVE NOT RECEIVED YET: _____

PENSION OR PROFIT SHARING IF YOU QUIT JOB NOW: _____

The hiring of a lawyer is an important decision that should not be based solely on advertisements. Before you decide, ask us to send you free written information about our qualifications and experience. Transmission of the information in this web site is not intended to create, and receipt does not constitute, an attorney-client relationship.

REAL ESTATE ADDRESS	VALUE	MORTGAGE BALANCE	MONTHLY PAYMENT	MORTGAGE CURRENT

AUTOS, TRUCKS, RV., BOATS YR., MAKE, MODEL, MILEAGE VALUE	VALUE	LOAN BALANCE	MONTHLY PAYMENT	PAYMENT

Any other valuable assets? _____

OTHER SECURED LOANS:

CURRENT CREDITOR	COLLATERAL	LOAN BALANCE	MONTHLY PAYMENT	PAYMENT

STUDENT LOANS:

U.S. Department of Education/or: _____

LOAN BALANCE	MONTHLY PAYMENT	IS LOAN DEFERRED

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INTERNAL REVENUE SERVICE DEBT: Have you filed every year you were required to file taxes?

Years you owe taxes: _____

Total amount owed: _____

UNSECURED DEBTS (CREDIT CARDS, MEDICAL BILLS, REPOSSESSIONS, ETC.):

CREDITOR	AMOUNT OWED	RESPONSIBLE PARTY	CO-SIGNOR	
			YES	NO

Estimated Amount of Unsecured Debt: _____

Estimated number of creditors: _____

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CREDITOR	AMOUNT OWED	JUDGEMENT OBTAINED

MONTHLY INCOME EXPENSES	MONTHLY
HUSBAND How often are you paid? _____ Take home pay each pay period? _____	Rent/Mortgage: _____ Utilities: _____ Food: _____ Clothing: _____ Medical/Dental: _____ Recreation: _____ Student Loan: _____ Car Insurance: _____ Other Insurance: _____ Gas: _____ Vehicle Maintenance: _____ Alimony: _____ Child Support: _____ Total Car Payments: _____ Other: _____
WIFE How often are you paid? _____ Take home pay each pay period? _____	
OTHER INCOME Child Support: _____ Social Security: _____ Disability: _____ Rental Income: _____ Other: _____	

5703 Red Bug Lake Road Suite 353 Winter Springs, FL 32708 Direct: 321.872.7220 Office: 321.872.7573 Facsimile: 321.222.9573 Email: divinne@dbjosephfirm.com