

**OFFICE OF THE CHAPTER 13 STANDING TRUSTEE
DAVID WM. RUSKIN**

Administering bankruptcy cases in the EASTERN DISTRICT OF MICHIGAN – DETROIT

341 MEETING DEBTOR QUESTIONNAIRE

DEBTOR NAME: _____
JOINT DEBTOR NAME: _____
CASE NUMBER: _____
DATE OF 341: _____ **TIME OF 341:** _____

USE OF THIS FORM WILL REDUCE THE LENGTH OF THE 341 MEETING.

DIRECTIONS: ONCE COMPLETED RETURN TO **YOUR LAWYER** WHO MUST SEND TO THE TRUSTEE AT: WWW.BKDOCS.US NO LATER THAN **14 DAYS PRIOR** TO THE 341 MEETING.

**CHECK
YES / NO**

- | Yes | No | |
|-----|----|--|
| Yes | No | 1. Did you personally read and sign the petition, schedules, statements, plan and related documents? |
| Yes | No | 2. Is the spelling of your name, address and last four digits of your social security number on the Trustee records correct? |
| Yes | No | 3. Have you listed all of your liabilities and everyone you owe money to? |
| Yes | No | 4. Have you filed with the IRS complete tax returns for the last four (4) calendar years prior to the filing of this case?
If not, what years were not filed: _____ |
| Yes | No | 5. Are the tax returns you sent to the Trustee the same ones you filed with the IRS? |
| Yes | No | 6. In your schedules and statement of financial affairs have you disclosed all income including inheritance, severance pay, employment bonus, profit sharing, payments from a pension plan or any other additional income during the one year prior to filing? |
| Yes | No | 7. Do you have a Domestic Support Obligation (DSO)? If yes, is the post-petition DSO current? _____ Yes _____ No |
| Yes | No | 8. Have you lived in Michigan continuously for the past two years? |
| Yes | No | 9. Do you have insurance on all your property and assets to the extent required by contract or statute? |
| | | 10. Do you understand that you are required to carry insurance at all times during the course of your chapter 13 case? |

**CHECK
YES / NO**

- Yes No 11. Do you expect to receive an inheritance, severance pay, employment bonus, profit sharing, payments from a pension plan or any additional income other than the income disclosed on Schedule I the next five years?
If yes, please explain: _____
- Yes No 12. Do you currently have any other legal matter being handled by an attorney other than your bankruptcy attorney?
If yes, please list nature of the matter: _____
Name and phone number of attorney, if any: _____
- Yes No 13. Do you anticipate needing the services of an attorney other than your bankruptcy attorney over the next five years?
If yes, please state the nature of the anticipated matter: _____
Name and phone number of attorney, if any: _____
- Yes No 14. Are there any errors or omissions to bring to the Trustee's attention at this time?
If yes, please explain: _____

15. Tell us your sources of income: _____

16. How often are you paid?
Weekly Biweekly (26 pays/year) Semi-monthly (24 pays/year) Monthly
Other: _____

17. What is your marital status? (If divorced, what year was the divorce judgment entered?)
Married Single Divorced (year Judgment entered _____)

I declare under penalty of perjury that I have read this questionnaire on _____ and that the above answers are true and correct to the best of my knowledge, information and belief.

Printed Name (Debtor)

Printed Name (Joint Debtor)

Signature (Debtor)

Signature (Joint Debtor)

Email Address (Debtor)

Email Address (Joint Debtor)