

BUTLER LAW OFFICE

BANKRUPTCY CLIENT INTAKE FORM

Initial Consultation Fees: \$100 per 1/2 hour - \$200 per hour (UNLESS OTHER ARRANGEMENTS HAVE BEEN MADE)

DATE: _____ How did you hear about us? _____

NAME: _____ SSN: _____ Home Phone _____
LAST FIRST M.I. Cell Phone _____
Work Phone _____

SPOUSE: _____ SSN: _____ Email _____
LAST FIRST M.I. Cell Phone _____
Work Phone _____
Email _____

HOME ADDRESS: _____
City State Zip code

Emergency Contact Name(s): _____ Phone(s): _____

FINANCIAL INFORMATION

1. Your Gross Monthly Income \$ _____ Occupation? _____ Name of employer _____

2. Spouse Gross Monthly Income \$ _____ Occupation? _____ Name of employer _____

Other sources of income in your household: (child support, social security, etc.) _____

Total household income for past 6 months \$ _____ Total individuals in your household _____

3. How long have you lived in Arizona? _____ If less than 2 years, where did you previously live _____

4. Do you own _____ or lease _____ your home? Market Value of home if you own \$ _____
If you own your home, when did you purchase it? _____ Monthly lease payment if you lease \$ _____

5. Name of First Mortgage Company _____ Balance of 1st Mortgage \$ _____
Monthly Mortgage payment \$ _____ Includes taxes and insurance? ___ Y ___ N Annual Interest rate _____ %

Date of last payment _____ Date of Foreclosure sale, if any _____

Name of Second Mortgage Company (if any) _____ Balance of 2nd Mortgage \$ _____

Monthly payment \$ _____ Annual Interest Rate _____ % Date of last payment _____

Homeowner's Association name _____ Monthly Payment \$ _____ # months behind _____

6. Other real property owned:

Description (home, 4 plex, etc)	Market Value	1 st Mortg amt/ Month Payment	2 nd Mortg amt/ Month Payment	Foreclosure date?
_____	_____	_____/_____ _____/_____	_____/_____ _____/_____	_____
_____	_____	_____/_____ _____/_____	_____/_____ _____/_____	_____

7. VEHICLES

Make/Model	Year	Mileage	Date Purchased	Loan Balance	Monthly Payment	Date of Value? Last Payment
_____/_____	_____	_____	_____	\$ _____	\$ _____	_____
_____/_____	_____	_____	_____	\$ _____	\$ _____	_____
_____/_____	_____	_____	_____	\$ _____	\$ _____	_____
_____/_____	_____	_____	_____	\$ _____	\$ _____	_____
_____/_____	_____	_____	_____	\$ _____	\$ _____	_____

8. Total of credit cards, medical or other unsecured debts \$ _____

Notes: (office use only) _____

Projected HAMP Payment _____ PI payment at 2 % _____ Escrow payment \$ _____

9. Are any of your debts with a Credit Union? Yes___ No___ If yes, list all Credit Union debts: _____
10. Do you have any unpaid student loans? _____ Amount owed \$_____
- Do you owe any back due child support? _____ Amount in Arrears \$_____ Monthly payment \$_____
11. Do you have any unfiled tax returns? _____ What Years ?_____
- Do you owe any taxes to any tax authority? _____ IRS \$_____ State \$_____ Property Taxes \$_____
12. Do you have any judgments entered or lawsuits pending against you? _____ Describe: _____
13. Are any of your debts co-signed? _____ By whom? _____
14. Have you ever filed Bankruptcy (7 or 13)? _____ Ch 7 date _____ Ch 13 date _____
15. Have you operated a business within the last 6 years? _____ Nature of business _____ Is it operating? _____
16. Are you being garnished, threatened or repossessed? _____ Describe: _____
17. Have you had cash advances against your credit cards of more than \$750 in the last 70 days, or used any credit card to purchase more than \$500 worth of good and services in the last 90 days? _____
18. Other assets of value including 401(l), IRAs, businesses owned, real estate, stocks or other investments:
- | Description | Market Value | Loans? |
|-------------|--------------|--------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
19. **Could you receive an inheritance in the next 6 years?** No___ Yes___ (Explain) _____
20. Have you transferred anything of significant value within the last 4 years? Yes___ No___
- What was transferred and to whom? _____
21. Do you lease any real property or any personal property (cars, etc) _____
- Details: _____
22. Do you have any claims pending against someone else for personal injury or other claims? _____
- Details _____

23. I/We understand that the initial consultation fee is \$100 for 1/2 hour and \$200 for an hour, unless otherwise arranged.

24. Representation : I/We affirm that the information provided on this form (and/or to be provided in the future) is true and accurate and complete to the best of my/our knowledge.

Signatures: _____

NOTE: FEE QUOTES ARE GOOD FOR 90 DAYS--ADDITIONAL CHARGES MAY APPLY THEREAFTER

FOR OFFICE USE ONLY		First \$	Second \$	HOA \$					
Estimated arrearages on home:	\$ _____	_____	_____	_____					
Car Loans:	\$ _____	Vehicle 1 \$	Vehicle 2 \$	_____					
Other secured debt	\$ _____	Describe _____							
Tax liabilities	\$ _____	1	2	3	4	5	6	7	8
Child Support	\$ _____	47,360	60,761	62,013	74,317	82,717	91,117	99,517	107,917
Other	\$ _____	3,946	5,063	5,167	6,193	6,893	7,593	8,293	8,993
Fees	\$ _____	Sec: \$1,184,200		Unsec: \$394,725					
TOTAL	\$ _____								
Estimated plan payment:	60 months: _____	36 months : _____							

Butler Law Office

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DEBT ASSISTANCE INITIAL CONSULTATION AGREEMENT

1. The client desires to obtain advice and assistance regarding debt issues and/or relief from debt, and has scheduled an initial consultation with the Butler Law Office. The client understands that in order for the attorney to give meaningful advice, certain detailed financial information must be provided fully and accurately. The client agrees to give accurate, honest, full and fair disclosure of financial information as required by attorney.
2. The attorney agrees to interview the client and give advice and counsel to assist the client in making decisions about debt problems, the possibility of filing bankruptcy, selecting the appropriate chapter of bankruptcy, or how a bankruptcy case may help or hurt the debt problems of the client. The initial consultation will consist of a review of the client's current monthly income, completion of a monthly budget of regular expenses, preliminary analysis of qualifications for certain chapters of bankruptcy, a preliminary analysis of the client's debt statements, and a legal recommendation.
3. **Unless other arrangements are made in advance**, the initial one-half hour or one-hour consultation and interview will be performed by a licensed attorney at the following rates: \$100 for one-half hour and \$200 for one hour. Should client retain attorney within 90 days of the initial consultation, these fees will be applied to the fees for bankruptcy. All other services will be billed at the agreed upon hourly rate of \$350 per hour for Senior Attorneys, \$225 per hour for Associate Attorneys, and \$125 per hour for paralegals.
4. In the event that the client decides to file a bankruptcy, a new written agreement must be signed by the client and the attorney, which will supersede this agreement relating to attorney fees and expenses. This new agreement will also provide a detailed explanation of the services performed or to be performed by the Butler Law Office.

AGREED, UNDERSTOOD AND SIGNED this _____ day of _____, _____.

Client

Client

Butler Law Office