

Name: _____ Case # _____ Date: _____

BUSINESS CASE QUESTIONNAIRE

INSTRUCTIONS: Complete all sides of the form, using additional pages if necessary. If using additional pages, be sure to include the debtor's name, case number and question number on each additional page.

*******IMPORTANT*******

All information provided must be in the form requested. Information and/or documents presented in an unorganized fashion will not be accepted. Additionally, **this checklist, along with COPIES of all requested documents, must be received in the Trustee's Office no later than 10 working days prior to your § 341(a) Meeting of Creditors.** Failure to comply will result in the continuance of the your § 341(a) Meeting of Creditors.

Please contact your attorney if you have any questions.

1. **Do you have any employees?** Yes No
(If so, complete the employee section on page 3)

2. **Is your company a:**
 - Sole Proprietorship
 - Partnership
 - Corporation

3. **Do you have any licensing requirements?** Yes No
(If so, complete the license section on page 3)

4. **In the operation of your business, is any insurance required?** Yes No
(If so, complete the insurance section on page 3)

5. **Description of Business:**
 - a. Name of business: _____
 - b. Address or location of business: _____

 - c. Describe the type of business you operate (ie. The nature of work performed or services provided): _____

 - d. Are you leasing office space? Yes No
If yes, is it your intention to continue with the lease? Yes No
 - e. When did the current business start operating? _____
 - f. Is your business seasonal? Yes No
If yes, specify your good and bad months: _____
 - g. Name(s) of owners: _____
If this is a joint case, are both debtors engaged in the same business? N/A Yes No
 - h. Are you leasing any business equipment? Yes No
If yes, identify the type of equipment, creditor's name, and terms of the lease: _____
 - i. Have you pledged your receivables, rents profits, or other case as collateral for any loans?
 Yes No

- j. Is the business the reason for the bankruptcy? € Yes € No
 If yes, explain: if no, then what circumstances led you to file Chapter 13 bankruptcy?

6. Description of Assets

- a. On a separate page, list and describe each item with a value of \$500 and over. Include the following in the description:
- Original cost of the item
 - The age of the equipment
 - The item’s current market value (what you would sell the item for in its present condition and assuming a fair price)
- b. What would you estimate the market value of your inventory to be? \$ _____
- c. What would you estimate the market value of your account receivables to be? \$ _____
- d. If you were to buy your business today, how much would you pay for it? \$ _____

7. Description of all bank accounts to which you have access

Use a separate page if necessary.

- a. Provide **copies**, not originals, of bank statements for all accounts for 6 months immediately prior to the filing of your Chapter 13 case. (NOTE: The Trustee may request copies of one of more canceled checks for this time period in order to clarify date contained on the bank statements).
- b. Are you the only authorized signatory on the account? € Yes € No
 If no, specify who else is an authorized signer: _____

Bank Name	Account Number	Checking or Savings Account	Business or Personal

8. List of all full and part time employees

Use a separate page if necessary.

Name of Employee	Position/ Function	Monthly Salary/ Hourly Rate	Part or Full Time

9. Tax returns

You **must** provide signed copies of the following tax returns to the trustee if you were required to file them:

- a. **Copies** of IRS form 941, EDD form DE-6 and proof of payment for the quarter ending prior to the filing of you Chapter 13 case. € N/A
- b. **Copies** of State Sales Tax, Use Tax, and/or Business Tax returns and proof of payment for the quarter ending prior to the filing of your Chapter 13 case. € N/A
- c. **Copies** of your most recent federal tax returns with **all** supporting schedules, including any corporation and or partnership tax returns. € N/A

SAMPLE Profit and Loss Statement

Month _____ Year _____

(Do not include personal household expenses. Include ONLY business expenses)

INCOME

- | | | |
|-----------------------------------------------------|----|--|
| 1. Gross receipts or sales:..... | \$ | |
| 2. Cost of goods sold:..... | \$ | |
| a. Purchases:..... | \$ | |
| b. Cost of labor: (excluding employee salary) | \$ | |
| c. Materials and supplies:..... | \$ | |
| 3. Gross profit: (subtract line 2 from line 1)..... | \$ | |
| 4. Other income:..... | \$ | |
| 5. Gross income: (add lines 3 and 4)..... | \$ | |

EXPENSES

- | | | |
|---------------------------------------------------------|----|--|
| 6. Business property rent/lease:..... | \$ | |
| 7. Salaries and wages of employees:..... | \$ | |
| 8. Employee benefits:..... | \$ | |
| 9. Equipment lease payments:..... | \$ | |
| 10. Secured debt payments:..... | \$ | |
| 11. Supplies: (not included in 2(c))..... | \$ | |
| 12. Utilities:..... | \$ | |
| 13. Telephone:..... | \$ | |
| 14. Repairs and maintenance:..... | \$ | |
| 15. Miscellaneous office expense:..... | \$ | |
| 16. Advertising:..... | \$ | |
| 17. Travel and entertainment:..... | \$ | |
| 18. Professional fees:..... | \$ | |
| 19. Insurance:..... | \$ | |
| a. Liability:..... | \$ | |
| b. Property:..... | \$ | |
| c. Vehicle:..... | \$ | |
| d. Worker's Compensation:..... | \$ | |
| e. Other:..... | \$ | |
| 20. Taxes:..... | \$ | |
| a. Payroll:..... | \$ | |
| b. Sales:..... | \$ | |
| c. Other:..... | \$ | |
| 21. Total expenses (add lines 6 through 20)..... | \$ | |

TOTAL PROFIT (LOSS) FOR MONTH (subtract line 21 from line 5) \$

Declaration Under Penalty of Perjury by Debtor(s)

I/we declare under penalty of perjury that the information provided in this profit and loss is true and correct to the best of my/our knowledge and belief.

Signature: _____ Date: _____

Signature: _____ Date: _____