

**CHAPTER 7 CLIENT CHECKLIST**  
**IMPORTANT – PLEASE READ CAREFULLY**

*List of information required prior to being able to file your bankruptcy:*

\_\_\_\_\_ Fees need to be paid in full before proceeding with the following steps. Everything is time sensitive, **so do not proceed with the following until you are paid in full.**

\_\_\_\_\_ CREDIT COUNSELING NEEDS TO BE COMPLETED.. If you are married, each of you must complete the class and get a certificate. **DO NOT TAKE THIS CLASS UNTIL YOU PAY YOUR ATTORNEY FEES PLEASE, BECAUSE THIS CERTIFICATE DOES EXPIRE!**

**Please provide us with the following:**

\_\_\_\_\_ Previous six months of pay stubs/proof of income (all sources – food stamp income, social security, retirement) – continue sending pay stubs until your case is filed!

\_\_\_\_\_ 2019 and 2020 Federal Tax Returns including W-2(s). If you have not filed your 2020 returns, please remit your 2018 returns. If you have not filed tax returns in the last two years, provide us with copies of the last two returns you have filed.

\_\_\_\_\_ Complete the attached expense sheet – use a separate sheet if you need to add any additional information

\_\_\_\_\_ Either list your debts (names, addresses, account numbers and amount owed) or bring in copies of all your bills as well as any law suits filed against you. Remember, you cannot exclude anyone you owe money to, this includes family/friend.

Your documents may be dropped off at our office during normal business hours. Once you are paid in full and we have all the requested information, we will follow up with you. You may also fax or email your documents: Fax: (575) 527-1199 Email: [eva@arvizulaw.com](mailto:eva@arvizulaw.com). *If you are mailing your documents please send to: 715 E Idaho Ave. Suite 3F, Las Cruces NM 88001.* Please feel free to call us if you have any questions at (575) 527-8600.

As a reminder, after your bankruptcy is filed, you have to complete an additional debtor's education class (if you are married, both of you need to complete the class.) This needs to be done before you can get a discharge, so please complete this class as soon as possible after your bankruptcy is filed.

Name: \_\_\_\_\_

## Current Expenses

Do you and your spouse maintain separate households?  No  Yes. **If so, fill one page out for your household and another for your spouse's.**

The following questions ask for your expenses each month. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.), write in the amount and the frequency that you pay the amount. Do not include the debts you will no longer be paying (ie, debts to be discharged in your bankruptcy – credit cards, vehicle you are surrendering, etc.)

### Indicate how much you pay for each item each month...

- |  |          |
|--|----------|
| 1. your rent or your home mortgage   | \$ _____ |
| Does that amount include real estate taxes? <input type="checkbox"/> No <input type="checkbox"/> Yes |          |
| Does it include property insurance? <input type="checkbox"/> No <input type="checkbox"/> Yes         |          |
| 2. electricity and heating   | \$ _____ |
| 3. water and sewage  | \$ _____ |
| 4. telephone service/long distance   | \$ _____ |
| 5. Do you have any other utility bills? If so, what, and how much per month?                         |          |
| _____  | \$ _____ |
| _____  | \$ _____ |
| 6. home maintenance, including repairs and general upkeep  | \$ _____ |
| 7. food  | \$ _____ |
| 8. clothing  | \$ _____ |
| 9. laundry and dry cleaning  | \$ _____ |
| 10. medical and dental expenses  | \$ _____ |
| 11. transportation (not including car payments)  | \$ _____ |
| 12. entertainment, recreation, newspapers, magazines   | \$ _____ |
| 13. charitable contributions   | \$ _____ |
| 14. insurance not deducted from paycheck   |          |
| a) homeowner's or renter's insurance   | \$ _____ |
| b) life insurance  | \$ _____ |
| c) health insurance  | \$ _____ |
| d) auto insurance  | \$ _____ |
| e) other insurance _____   | \$ _____ |
| 15. taxes not deducted from paycheck   | \$ _____ |
| 16. installment payments for car, furniture, etc. (Specify)  |          |
| _____  | \$ _____ |
| _____  | \$ _____ |
| 17. alimony, maintenance, support paid to others   | \$ _____ |
| 18. payments for support of dependents not living at home  | \$ _____ |
| 19. expenses from operation of business  | \$ _____ |
| 20. other expenses not listed above _____  | \$ _____ |
| _____  | \$ _____ |

Have you paid any creditors more than \$600 in the last 90 days, if so, to whom and how much?:

Have you paid any money to family/friends within the last year, if so, to whom and how much?: