

LAW OFFICES OF ROBERT L. FIRTH

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CLIENT EVALUATION SHEET

FILL OUT ALL QUESTIONS COMPLETELY AND TRUTHFULLY

PLEASE BRING A COPY OF YOUR SOCIAL SECURITY CARD & DRIVER'S LICENSE TO YOUR MEETING

Name: _____
US Citizen or Registered Alien

Spouse: _____
US Citizen or Registered Alien

Others Names Used

Others Names Used

Date of Birth _____

Date of Birth _____

Street Address: _____

Mailing Address (if Different) _____

E-mail

Spouse E-mail

Best phone numbers to reach you

Best phone numbers to reach you

EMPLOYED YES NO

EMPLOYED YES NO

What do you do? _____

What do you do? _____

How long have you lived at your current address? _____

How long have you lived in CA? _____

Names and Ages of Dependents:

_____, _____, _____

Please tell us why you have decided to see Attorney Firth? _____

Have you or your spouse **ever** filed bankruptcy before? YES No If **YES**, Where, When, and Case Number of all prior cases:

How did you hear about the Law Offices of Robert Firth?

Internet Billboard Newspaper Radio T.V. Yellow Pages

Referral Who: _____

HAVE YOU FILED YOUR FEDEAL AND STATE TAXES FOR THE LAST 3 YEARS? YES NO

DO YOU OWE THE I.R.S.? YES NO Which Tax Years? _____ How Much? _____

DO YOU OWE STATE TAX? YES NO Which Tax Years? _____ How Much? _____

Do you: RENT or OWN

Home: 1st MTGE Amount \$ _____ MTGE Payment \$ _____

How far behind are you? _____ (#) Months _____ Payments due on _____ date of each month

When was the home purchased? _____

2nd MTGE Amount \$ _____ MTGE Payment \$ _____

How far behind are you? _____ (#) Months _____ Payments due on _____ date of each month

When was the loan taken out? _____

3rd MTGE Amount \$ _____ MTGE Payment \$ _____

How far behind are you? _____ (#) Months _____ Payments due on _____ date of each month

When was the loan taken out? _____

Total Debt \$ _____ Fair Market Value \$ _____

Vehicles: (1) Year _____ Make _____ Model _____ Miles _____ Debt \$ _____ FMV _____

Own Buying Leasing How far behind are you? _____ Monthly payment \$ _____

(2) Year _____ Make _____ Model _____ Miles _____ Debt \$ _____ FMV _____

Own Buying Leasing How far behind are you? _____ Monthly payment \$ _____

(3) Year _____ Make _____ Model _____ Miles _____ Debt \$ _____ FMV _____

Own Buying Leasing How far behind are you? _____ Monthly payment \$ _____

Do you have any RENTAL PROPERTY, LAKE LOTS, R.V.'S BOATS, MOBILE HOMES, TIME SHARES, OR UNDEVELOPED REAL ESTATE? Please List and Give Details (How much do you owe? How much is it worth?):

ARE YOU ON TITLE TO ANY OTHER PROPERTY? YES NO

HOW MUCH CREDIT CARD DEBT DO YOU OWE? \$ _____

WERE ANY OF THESE CREDIT CARDS USED TO PURCHASE HOME FURNISHINGS? YES NO

Give estimates of credit card debt:

Name: _____ \$ _____ Name: _____ \$ _____

Name: _____ \$ _____ Name: _____ \$ _____

Store credit card debt:

Name: _____ \$ _____ Name: _____ \$ _____

Name: _____ \$ _____ Name: _____ \$ _____

Finance Co's: \$ _____ Other Lines of Credit: \$ _____

Gas Cards: \$ _____ Medical Bills: \$ _____

Other: \$ _____

Have you done ANY CASH ADVANCES or BALANCE TRANSFERS or CREDIT CARD CHECKS on credit cards in the last 12 Months? YES NO (How Much?) \$ _____

HAVE YOU MADE ANY LARGE TRANSACTIONS IN THE LAST FOUR YEARS? YES NO

DO YOU OR YOUR SPOUSE HAVE ANY BAD CHECKS WHICH ARE CURRENTLY OUTSTANDING? YES NO _____

DO YOU OR YOUR SPOUSE HAVE ANY LAWSUITS PENDING? YES NO
FROM WHOM: _____

AUTO ACCIDENTS IN THE PAST 2 YEARS? YES NO _____

HAVE YOU EVER CAUSED AN ACCIDENT AS A RESULT OF DRIVING UNDER THE INFLUENCE? YES NO EXPLAIN: _____

DO YOU OWN OR HAVE YOU EVER OWNED A BUSINESS? YES NO
WHAT IS THE NAME? _____ WHERE IS IT? _____
WHAT YEAR DID IT START / END? _____

ARE THERE ANY GARNISHMENT ACTIONS AGAINST YOU? YES NO
WHEN DID IT START? _____

ARE YOU PENDING OR HAVE YOU EVER HAS A HOME FORECLOSURE OR MOBILE HOME OR CAR REPOSSESSION? YES NO If yes, explain: _____

Have you TRANSFERRED (sold/given away) ANY PROPERTY in the last 3 years? YES NO
Have you TRANSFERRED (sold/given away) ANY REAL ESTATE IN THE PAST 5 YEARS? YES NO

Have you ever sold or purchased any real estate to or from someone on an assumption? YES NO

Are you in a divorce, contemplating divorce or been divorced? YES NO
Is any ex-spouse on debts with you? YES NO

Do you have any student loans or are you guarantor on someone else's student loan? YES NO

Are you receiving phone calls from creditors? YES NO

Do you have any RETIREMENT PLANS (IRA's, 401K, Profit Sharing, Retirement, etc.) OR CASH VALUE IN A LIFE INSURANCE POLICY? YES NO If yes, circle which and give the value: \$ _____

LIST CASH IN ALL ACCOUNTS: SAVINGS \$ _____ CHECKING \$ _____ OTHER \$ _____

STOCKS, BONDS, MUTUAL FUNDS OR CD'S? YES NO \$ _____

DOES ANYONE OWE YOU ANY MONEY? YES NO If yes, how much? \$ _____

DO YOU OWN ANY OTHER VALUABLE PROPERTY? YES NO

HOW MUCH ARE YOUR HOUSEHOLD FURNISHING WORTH? \$ _____

Do you EXPECT TO INHERIT IN THE NEXT 6 MONTHS, or are you the BENEFICIARY OF LIFE INSURANCE or ANY TRUST? YES NO
Explain: _____

MONTHLY FAMILY BUDGET

GROSS INCOME: YOU \$ _____ SPOUSE _____
TAKE HOME: YOU \$ _____ SPOUSE \$ _____
OTHER INCOME (social security, pension, rental income, etc.) YOU \$ _____ SPOUSE \$ _____

BASIC LIVING EXPENSES:

House Mortgage / Rent Payment: → → → \$ _____
Real Estate Taxes (if not included in mortgage) → → → \$ _____
HOA Dues: → → → \$ _____
Utilities: (electric, gas, water, cable, internet) → → → \$ _____
Home Phone: (if not included in internet) → → → \$ _____
Cell Phone: → → → \$ _____
Food: → → → \$ _____
Clothing: → → → \$ _____
Laundry/ Dry Cleaning: → → → \$ _____
Medical / Dental: → → → \$ _____
Education: → → → \$ _____
Insurance (for home if not included in mortgage): → → → \$ _____
Insurance (for car): → → → \$ _____
Gas, Repairs & Maintenance for cars: → → → \$ _____
Charitable Contributions: → → → \$ _____
Recreation / Entertainment: → → → \$ _____
Car Payments: → → → \$ _____
Day Care: → → → \$ _____
Support Payment (NOT Deducted from your Check): → → → \$ _____
Other: → → → \$ _____

TOTAL: → → → \$ _____

I HAVE COMPLETED THE INFORMATION ABOVE AND IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Client Signature

Date