IN THE UNITED STATES BANKRUPTCY COURT

FOR THE WESTERN DISTRICT OF PENNSYLVANIA

|  |  |  |
| --- | --- | --- |
| In re: | : |  |
|  | : | Bankruptcy No. |
| Debtor(s) | : |  |
|  | : | Chapter 11 |
| Movant(s) | : |  |
|  | : | Related to Document No. |
| v. | : |  |
|  | : |  |
| Respondent(s) | : |  |
| (If none, then “No Respondent”) | : |  |

CHAPTER 13 BUSINESS CASE QUESTIONNAIRE

 Local Bankruptcy Rule 1007-4 requires Chapter 13 debtors that are self-employed (including debtors acting as landlords), to complete and submit this Questionnaire to the Trustee along with all documents set forth in the Checklist which follows the signature page of the Questionnaire. You must answer all items in the Questionnaire. Use a separate page if additional room is needed, but be sure to reference the additional page next to the item you are answering. All information must be complete and organized. Failure to provide detailed and accurate information may result in the Trustee filing a motion to dismiss your case.

* You must send this completed Questionnaire along with all required attachments to Ronda J. Winnecour, Trustee, U.S. Steel Tower, Suite 3250, 600 Grant Street, Pittsburgh, PA 15219 so that it reaches the Trustee at least fourteen (14) days prior to your first scheduled meeting of creditors. If you fail to do so, the Trustee may require your appearance at an additional meeting or file a motion to dismiss your case.
* Do not file this Questionnaire with the Clerk of the Bankruptcy Court.
* The Questionnaire must be dated.
* The Questionnaire must contain the original signature of all debtors in the case.
* A copy of the Questionnaire should be kept by the debtor for future reference.
* If you have questions concerning this Questionnaire, please contact your attorney.

Debtor (s)’ Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chapter 13 Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Business \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List all past names used by Business \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location where business is operated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Description of Business Activities/Type of Business \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What circumstances led you to file this bankruptcy? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How do you expect these circumstances to change so that you will be able to fund a Chapter 13 Plan? \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Type of Business Organization, circle one:

 Corporation Sole Proprietorship Partnership Other

 Has business ever been incorporated? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 Date business began \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Federal ID number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State ID number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. If your business is a Partnership, please answer (a) to (c) below:

 (a) Names of Partners \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (b) Percentage of your ownership: Debtor \_\_\_\_\_\_\_\_\_\_ % Joint Debtor \_\_\_\_\_\_\_\_\_\_ %

 (c) Is there a written partnership agreement? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, please include a copy of the agreement with this Questionnaire when you return it to the Trustee.

3. If your business is a Corporation, please answer (a) to (g) below:

 (a) Who are the shareholders? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (b) How many shares have been issued and are outstanding? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (c) What is your percentage ownership? Debtor \_\_\_\_\_\_\_\_\_\_ % Joint Debtor \_\_\_\_\_\_\_\_\_\_ %

 (d) State of incorporation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (e) Is the corporation in good standing with the Secretary of State? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (f) Fair Market Value of Corporate Assets, including going concern value $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Basis of value \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (g) Amount of Corporate Debts $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Is the business cyclical? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, when is the busy season? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 If yes, when is the slow season? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Do you have an accountant or bookkeeper? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, please provide the name, address and phone number of this individual \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you understand that you are required to file monthly operating reports with the Court and serve the Trustee with a copy by the 15th of each month that you are in bankruptcy? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

6. Are all tax returns which should have been filed to this point in time filed? \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

 If no, list years that are delinquent, type of return owed, and entity to which return is owed:

 Year Entity(s) and Type of Return Due

 \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you understand that while you are in Chapter 13, you are individually responsible for keeping current with all of your post-petition business as well as personal tax obligations? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

Do you understand that the Court in this District has entered a General Order which requires all delinquent tax returns to be filed within sixty (60) days from the date that you filed your bankruptcy case?

\_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

7. Have you filed estimated quarterly income tax returns with the IRS? \_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_ No

 If yes, please provide copies of the last three (3) estimated returns filed, with proof of payment.

 If no, explain why not \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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8. Does the business have employees? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, how many? \_\_\_\_\_\_\_ Are any of these persons related to you? \_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_ No

 Does the business withhold from their wages? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, where do you deposit the withholdings and how often?

 i. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ii. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide copies of proof of payment of employee withholding taxes for the three (3) months prior to the month that your case was filed.

Do you understand that you must keep the withholding funds separate from your general operating funds?

\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No

 If you do not withhold, how are the employees compensated? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Do you have subcontractors? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 Are 1099s issued? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

9. Is your business required to collect sales tax? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, has your business collected and remitted sales taxes on a regular basis? \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

 If no, explain why \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Do you understand that you must keep the sales tax funds separate from your general operating funds?

 \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

Please provide copies of proof of payment of sales taxes for three (3) months prior to the month your case was filed.

10. Are you leasing office space? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, answer (a) to (e) below:

 (a) Address of Property \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (b) Landlord’s Name and Address

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (c) Monthly Rental Payment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (d) Term of lease \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (e) Do you wish to continue the lease? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

11. Does the business lease business equipment or autos? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, answer (a) to (e) below:

(a) Description of leased/rented items? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (b) Person or entity’s name and address from which items are rented or leased \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (c) Payment terms \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (d) Term of lease \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (e) Do you wish to continue the lease? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

12. Does the business have any outstanding contracts? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, please describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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13. If you rent real property owned by you to others, please complete the following:

 Address of Tenant Date Lease Began Date Lease Ends Amount of Monthly Rent

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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14. Is the business required to have any business licenses or permits? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, please list:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 If yes, are licenses/permits current? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

15. Does the business carry the following insurance policies?

 Commercial Liability? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 Workmans Compensation? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 Fire Building? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 Fire Contents? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 Automobile Coverage? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 Liquor liability? \_\_\_\_\_ Yes \_\_\_\_\_ No Policy No. \_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_

 List Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Are all policies current? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 List insurance agency(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you know that in order to continue the operation of your business, it is your responsibility to obtain and maintain comprehensive liability insurance for the operation for your business?

 \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

16. Does the business keep inventory on hand? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, what would you estimate the market value of your inventory to be? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 When was the last physical count of your inventory? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 What was the value of the inventory at that time? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please provide a list of your inventory.

17. What is the balance of the business accounts receivable? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 What amount of the receivables is reasonably collectible? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please provide a copy of your accounts receivable ledger.

 Have you pledged your receivables, rents, profits, or other cash as collateral for any loans?

 \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

 If yes, please identify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you understand that if you have borrowed money from any creditor and as security or collateral for the loan you have pledged accounts receivables, rents, or other cash, you may not use the accounts receivables, rents or cash without express written consent from the Creditor, or an order from the Bankruptcy Court allowing the use? \_\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_\_ No

18. If you were to buy your business today, how much would you pay for it? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I/We declare under penalty of perjury that the foregoing statement of information is true and correct to the best of my/our knowledge, information, and belief.

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Debtor’s signature

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Joint Debtor’s signature

**CHECKLIST OF DOCUMENTS**

**THAT MUST BE RETURNED WITH YOUR QUESTIONNAIRE**

You must send copies of the following documents to Ronda J. Winnecour, the Trustee, along with your completed Questionnaire within fifteen (15) days before the first scheduled § 341 meeting date. Failure to do so may cause the Trustee to require your attendance at an additional meeting or file a motion to dismiss your case.

\_\_\_\_\_ Operating statements showing income and expenses for the business for the twelve (12) months prior to the time of filing your bankruptcy case.

\_\_\_\_\_ Bank statements for all accounts for the twelve (12) months prior to the time of filing your bankruptcy case.

\_\_\_\_\_ Federal income tax returns with all accompanying schedules for the two (2) years prior to filing your bankruptcy case.

\_\_\_\_\_ State income tax returns with all accompanying schedules for the two (2) years prior to filing your bankruptcy case.

\_\_\_\_\_ Appraisals or other third party valuations of real estate, equipment, inventories and other business property listed in your bankruptcy schedules.

\_\_\_\_\_ Financial statements furnished to third parties such as banks and trade creditors within the two (2) years prior to filing your bankruptcy case, including but not limited to the balance sheet, income statement and cash flow statement.

\_\_\_\_\_ Current schedule of accounts receivable and accounts payable.

\_\_\_\_\_ Current insurance policies that cover the assets listed in your bankruptcy schedules.

\_\_\_\_\_ The business’s check register for the three (3) months prior to filing your bankruptcy case.

\_\_\_\_\_ If your business has employees, proof of payment of employee withholding taxes for the three (3) months prior to the month your case was filed.

\_\_\_\_\_ If your business is required to collect and remit sales taxes, proof of payment of sales taxes for the three (3) months prior to the month your case was filed.

\_\_\_\_\_ The last three (3) federal quarterly income tax returns with proof of payment.

\_\_\_\_\_ Any partnership agreement that exists.

\_\_\_\_\_ List of your inventory and equipment.

**MONTHLY OPERATING REPORT FOR CHAPTER 13 CASES**

Debtor’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gross receipts for month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If more than one source, list each) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TOTAL GROSS RECEIPTS: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business expenses paid:

Description Amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TOTAL EXPENSES: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 NET PROFIT OR (LOSS) FOR MONTH: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reports for each month are due by the 15th day of the following month and should be mailed to:

Chapter 13 Trustee, U.S. Steel Tower, Suite 3250, 600 Grant Street, Pittsburgh, PA 15219

USE ADDITIONAL SHEETS IF NEEDED

**BANKRUPTCY RULE 2015 AND SECTION 1304(c)**

**DUTY OF CHAPTER 13 DEBTORS ENGAGED IN A BUSINESS**

**TO KEEP RECORDS, MAKE REPORTS AND GIVE NOTICE OF CASE**

Bankruptcy Rule 2015 and Section 1304(c) of the Bankruptcy Code requires debtors engaged in business that file a Chapter 13 bankruptcy petition to:

* Keep a record of receipts and the disposition of money and property received.
* File with the Court, the Trustee, and with any governmental unit charged with responsibility for collection or determination of any tax arising out of such operation, periodic reports and summaries of the operation of the business, including a statement of receipts and disbursements, which shall include a statement, if payments are made to employees, or the amounts of deductions for all taxes required to be withheld or paid for on behalf of employees and the place where these amounts are deposited.
* As soon as possible after the commencement of the case, give notice of the case to every entity known to be holding money or property subject to withdrawal, including every bank, savings or buildings and loan association, public utility company, and the landlord with whom the debtor has a deposit, and to every insurance company which has issued a policy having a cash surrender value payable to the debtor, except that notice need not be given to any entity who has knowledge or has previously been notified of the case.