|  |
| --- |
| **Business**  **Bankruptcy Worksheet**  *LAW OFFICE OF*  ***MICHAEL BAUMER***  ***PO Box 1818***  ***Liberty Hill, Texas 78642***  ***MICHAEL BAUMER Telephone (512) 476-8707***  ***MEGAN BAUMER Fax: (512) 476-8604 Fax (512) 476-8604***  ***Email: baumerlaw@baumerlaw.com*** |

***Instructions***

Please answer these questions as carefully as possible. The information you give us will be used to compile the documents required to have your bankruptcy case approved. Any errors, omissions or misrepresentations may seriously affect your discharge of debts.

Where space permits, answer the questions on this questionnaire. If additional space is necessary, use a separate sheet identifying by number and letter the question answered. Please use all the space needed to answer all questions and parts of questions as completely as possible. Do not let the size of the space given to answer determine the extent of your response. A question asking a date, or when something happened, can usually be answered with the month and year. A question asking for an address must include the zip code, along with complete street or post office box address.

Remember, these questions must be answered fully and accurately. Failure to supply information will necessitate whatever additional contact with our firm as is required to obtain it. The effort expended on this questionnaire will help determine how quickly your bankruptcy can be filed. Failure to provide complete, accurate information may increase your attorney’s fees. Each question must be answered. If the question does not apply to you, write “None” in the space provided or work through the question. If you need additional space to answer any question, attach additional sheets.

***Submit all of these documents with your homework package:***

***We will scan and shred any paper documents you submit:***

1. **Tax returns for the last 3 years**.

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 1- Tax returns last 3 years

2. **Profit and loss statements for year to date and the past year if no tax return has yet been filed.**

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 2- P&L YTD 11182024

3. **Last 12 months bank statements for all bank accounts (checking, savings, money market, Pay Pal, etc)**.

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 3- 12 months bank statements

4. **Balance sheet**

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 4- Balance sheet YTD 11182024

5. Tax appraisals on all real estate owned in the last 2 years.

Not Applicable

6. Tax statements from all taxing authorities on all real property showing the yearly taxes for that property.

Not Applicable

7. Current statements and bills (credit cards, collection letters). Provide most recent statements only. **Do not supply multiple bills on the same debt**. Dumping multiple copies of the same bills **will** increase your attorney’s fees.

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 7- Current statements bills

8. Copies of any retail installment contracts from banks, credit unions or finance companies where you are purchasing cars, furniture, mobile home, or other personal property.

Not Applicable

9. Tax liens, levy notices or demand letters from the IRS.

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 09- Taxes IRS

10. All judgments or petitions from pending lawsuits.

[LBS Bankruptcy documentation](https://drive.google.com/drive/folders/1siWYY1wIIIwdwHXtT8Suvb9ABE6Kh_Jb?usp=drive_link) 10- Judgments from lawsuit

10. Closing folder on any real estate transactions within the last 2 years.

Not Applicable

Debtor Information:

|  |
| --- |
| Full name of entity: Leadingbit Solutions LLC |
| Form of entity (s corp, c corp, LLC, LLP, etc): |
| dba’s: |

*Tax ID Numbers:*

|  |
| --- |
| *1. 84-4331031* |
| *2.* |

*Address: Babbling Brook Dr. Mailing Address (if different):*

|  |  |
| --- | --- |
| *Number/Street: 14921* | *Number/Street/PO Box:* |
| *City: Austin Zip: 78728* | *City: Zip:* |
| *County: Travis* |  |

***Contact Information:***

*Contact Person: Silona Bonewald*

*Email address: silona@silona.com*

*Telephone Numbers: home\_\_**512-750-9220\_\_\_\_\_ work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*cell 512-750-9220 pager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Related Bankruptcy:

*Indicate any pending bankruptcies by an officer, director or shareholder.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Chapter**  **Filed** | **Court case was**  **filed in** | **Date case**  **was filed** | **Case Number** | **Debtor name as**  **styled in case** | **Disposition**  **of Case** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Statement of Financial Affairs

**1. Income from employment or operation of business.** State the **gross** and **net** amount of income you have received from the operation of your business from the beginning of this calendar year to this date. State also the **gross** and **net** amount of business income during the two (2) years immediately preceding this calendar year.

|  |  |
| --- | --- |
|  | **DEBTOR** |
| **2024**  (January to Present) | GROSS RECEIPTS: 284,093 |
| NET INCOME -140,786 |
| **2023** | GROSS RECEIPTS: 544,247 |
| NET INCOME -32,381 |
| **2022** | GROSS RECEIPTS: 736,072 |
| NET INCOME 101,813 |

**2. Income from any other sources.** State the amount of income the business received from any other source besides regular operation of your business.

|  |  |
| --- | --- |
|  | **DEBTOR** |
| **2024**  (January to Present) | AMOUNT |
| SOURCE |
| **2023** | AMOUNT |
| SOURCE |
| **2022** | AMOUNT |
| SOURCE |

**3.** Provide a list of all payments **totaling more than $5000** to any single creditor, **made within 90 days** prior to filing this case. For each creditor we need:

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME AND ADDRESS OF CREDITOR*** | ***DATE(S) OF PAYMENTS*** | ***PAYMENT AMOUNT(s)*** | ***BALANCE*** |
| 1. ***American Express – Delta Reserve Credit Card***   PO Box 96001, Los Angeles, CA 90096 - 8000 | 08/19/2024 | 40,000 | 24,955 |
| ***2.*** |  |  |  |

**Payments to Insiders**

List all payments made **within the last year** to or for the benefit of any creditor who was an insider. For example, insiders are your officers, directors, or 5% shareholders.

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME AND ADDRESS OF CREDITOR*** | ***DATE*** | ***AMOUNT*** | ***BALANCE*** |
| 1. ***Silona Bonewald*** | 03/27/2024 | 2,000 |  |
| 1. ***Raul Pineda (payback for money loaned to company 33,000 for medical insurance payment and payroll – 07312024)*** | 08/05/2024 | 33,0000 |  |

**4. Lawsuits, arbitrations, executions, garnishments and attachments.**

A. List all lawsuit or administrative proceedings (ie, collection actions, arbitrations) you have been a party to in the last 2 years.

|  |  |  |  |
| --- | --- | --- | --- |
| ***PLAINTIFF, DEFENDANT AND NUMBER*** | ***NATURE OF SUIT*** | ***COURT*** | ***CURRENT STATUS*** |
| 1. ***Emily Brown v. Leadingbit Solutions LLC and Silona Bonewald - Case 01-23-0001-2729*** | FSLA and unpaid wages | AAA – Employment Arbitration Tribunal | The total award before contingent, post-judgment fees to Claimant is  $65,379.96 |
| ***2.*** |  |  |  |

**Garnishments**

B. Describe all property that has been attached, garnished or seized under any legal or equitable process within the last year. (For example, IRS or student loan wage garnishments.)

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME/ADDRESS OF PARTY SEIZING*** | ***DATE*** | ***PROPERTY SEIZED*** | ***VALUE OF PROPERTY*** |
|  |  |  |  |

**5. Repossessions, foreclosures and voluntary returns.** List all property that has been repossessed by a creditor, foreclosed upon, or returned to the creditor voluntarily within the last year. For example, include any automobiles that were repossessed by a creditor or returned voluntarily to a creditor. Also include any real property that has already been foreclosed.

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME/ADDRESS OF CREDITOR*** | ***DATE*** | ***PROPERTY DESC.*** | ***VALUE OF PROPERTY*** |
|  |  |  |  |

**6. Assignments for the benefit of creditors.**

A. Describe any assignment of property that you have made for the benefit of a creditor within the last 120 days.

|  |  |  |
| --- | --- | --- |
| ***NAME/ADDRESS OF CREDITOR*** | ***DATE*** | ***TERMS/VALUE OF ASSIGNMENT AGREEMENT*** |
|  |  |  |

**Receiverships.**

B. List all property which has been in the control of a custodian, receiver, or court-appointed official within the last year. For example, list anyone who has been assigned by a court to administer your affairs with respect to a piece of property.

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME/ADDRESS OF CUSTODIAN*** | ***DATE*** | ***CASE TITLE & COURT LOCATION*** | ***DESCRIPTION./ VALUE*** |
| ***1.*** |  |  |  |

**7. Gifts and charitable donations. (Charities include your church.)** List all gifts or charitable contributions made within one year immediately preceding the commencement of this case**.**

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME/ADDRESS OF PERSON***  ***OR ORGANIZATION*** | ***DATE*** | ***DESCRIPTION & VALUE*** | ***RELATIONSHIP*** |
|  |  |  |  |

**8. Losses.** List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Include any car wrecks, burglaries, or damage to your home.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***DESCRIPTION OF PROPERTY*** | ***VALUE*** | ***DATE OF LOSS*** | ***% COVERED BY INSURANCE*** | ***DESCRIPTION OF CIRCUMSTANCES*** |
|  |  |  |  |  |

**9. Payments or transfers for debt relief.** List all payments the business made or property the business transferred, or which was transferred on your behalf, to anyone, including attorneys, debt consolidators, or **credit counseling services**, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately proceeding the commencement of this case.

|  |  |  |
| --- | --- | --- |
| ***NAME/ADDRESS OF ATTORNEY or***  ***CREDIT COUNSELOR*** | ***DATE(s) OF PAYMENT(s)*** | ***DESCRIPTION OF PAYMENT OR***  ***PROPERTY GIVEN*** |
|  |  |  |
|  |  |  |

**10. Transfers of property. (Including sales of houses, cars, boats, etc.)**

A. List all other property sold, transferred, or given away within four (4) years immediately preceding the commencement of this case. Include any trade-ins or down payments on vehicles. Include down payments for services not yet performed such as attorney fees.

|  |  |  |
| --- | --- | --- |
| ***NAME/ADDRESS***  ***AND RELATIONSHIP*** | ***DATE*** | ***DESCRIPTION OF PROPERTY***  ***AND AMOUNT RECEIVED*** |
| ***1.*** |  |  |
| ***2.*** |  |  |
| ***3.*** |  |  |

B. **Transfers to trusts**: List any property which you have transferred to any trust or similar device in the last ten years.

|  |  |  |
| --- | --- | --- |
| ***NAME & ADDRESS OF TRUSTEE*** | ***DATE OF TRANSFER*** | ***DESCRIPTION AND VALUE OF PROPERTY*** |
|  |  |  |

**11. Closed financial accounts.** List all financial accounts held in the business name which were closed within the last year. Include checking and savings accounts as well as certificates of deposit, share accounts held in banks and credit unions and any brokerage accounts.

|  |  |  |
| --- | --- | --- |
| ***FINANCIAL INSTITUTION (NAME AND ADDRESS)***  ***Chase Bank***  ***P.O. Box 15299 Wilmington, DE 19850-5299*** | ***TYPE OF ACCOUNT – Credit Card*** | |
| ***DATE CLOSED***  08/2024 | ***BALANCE WHEN CLOSED***  ***$ 0.00*** |

**12. Safe deposit boxes.** List all safe deposit boxes to which the business has had access within the last year.

|  |  |
| --- | --- |
| ***FINANCIAL INSTITUTION (NAME AND ADDRESS)*** | ***OTHERS WITH ACCESS TO THE BOX***  ***AND THEIR ADDRESS*** |
| ***LIST CONTENTS OF THE BOX*** |

**13. Setoffs.** List all setoffs made by any creditor, including landlords, banks & utilities, against a debt or deposit of the debtor within the last 90 days. For example, if a creditor took funds that he was holding for the business in order to satisfy a liability to him, that creditor should be listed here.

|  |  |  |
| --- | --- | --- |
| ***NAME/ADDRESS OF CREDITOR*** | ***DATE OF SETOFF*** | ***AMOUNT SETOFF*** |
|  |  |  |

**14. Property in the business’ possession owned by someone else.** List all property that is currently in the business’ possession that is owned by another entity.

|  |  |  |
| --- | --- | --- |
| ***NAME/ADDRESS OF OWNER*** | ***DESCRIPTION AND VALUE OF PROPERTY*** | ***LOCATION OF PROPERTY*** |
|  |  |  |

**15. Prior addresses.** List all addresses where the business has operated within **the last 4 years** preceding this petition. **(DO NOT INCLUDE PRESENT ADDRESS INFORMATION)** List the month and year for each address.

|  |  |  |
| --- | --- | --- |
| ***ADDRESS*** | ***FROM*** | ***TO*** |
|  |  |  |
|  |  |  |

**16. Environmental information.**

If you have received any notice from any governmental unit that you have or may have environmental contamination on any property you own, provide all documentation regarding the issue.

**17**. **Books, records, and financial statements.**

A. List all bookkeepers and accountants who kept or supervised the keeping of books of account and records of the debtor within the last six years.

|  |  |
| --- | --- |
| ***NAME & ADDRESS OF BOOKEEPER/ACCOUNTANT*** | ***DATES SERVICES RENDERED*** |
| ***Semple, Marchal & Cooper, LLP***  ***3101 N Central Ave, Suite 1600***  ***Phoenix, Arizona 85012*** | 01/2021 – 11/18/2024 |

B. List all firms or individuals who have **audited** the books of account and records, or prepared a financial statement of the debtor within the last two years.

|  |  |
| --- | --- |
| ***NAME & ADDRESS OF AUDITOR*** | ***DATES SERVICES RENDERED*** |
| ***Semple, Marchal & Cooper, LLP***  ***3101 N Central Ave, Suite 1600***  ***Phoenix, Arizona 85012*** | 01/2021 – 11/18/2024 |

C. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available explain.

|  |  |
| --- | --- |
| ***NAME & ADDRESS*** | ***AVAILABILITY OF BOOKS & RECORDS*** |
| ***Semple, Marchal & Cooper, LLP***  ***3101 N Central Ave, Suite 1600***  ***Phoenix, Arizona 85012*** | 01/2021 – 11/18/2024 access through Xero |

D. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the last two years.

|  |  |
| --- | --- |
| ***NAME & ADDRESS OF RECIPIENT OF FINANCIAL STATEMENT*** | ***DATE FINANCIAL STATEMENT ISSUED*** |
|  |  |

**18. Inventories.**

A. List the dates of the last two inventories taken of the debtor’s property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

|  |  |  |  |
| --- | --- | --- | --- |
| ***DATE*** | ***SUPERVISOR*** | ***DOLLAR AMOUNT*** | ***BASIS: COST, MARKET, OTHER*** |
|  |  |  |  |
|  |  |  |  |

B. List the name and address of the person having possession of the records of each of the two inventories reported in A., above.

|  |  |
| --- | --- |
| ***DATE OF INVENTORY*** | ***NAME & ADDRESS OF CUSTODIAN OF INVENTORY RECORDS*** |
|  |  |
|  |  |

**19.** **Current partners, officers, directors, and shareholders.**

A. **If the entity filing bankruptcy is a partnership**, list the nature and percentage of partnership interest of each member of the partnership.

|  |  |  |
| --- | --- | --- |
| ***NAME & ADDRESS OF PARTNER*** | ***NATURE OF INTEREST*** | ***PERCENTAGE OF INTEREST*** |
|  |  |  |
|  |  |  |

B. **If the entity filing bankruptcy is a corporation**, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5% or more of the voting securities of the corporation.

|  |  |  |
| --- | --- | --- |
| ***NAME & ADDRESS*** | ***TITLE*** | ***NATURE & PERCENTAGE OF STOCK OWNERSHIP*** |
| ***Silona Bonewald***  ***14921 Babbling Brook Dr.***  ***Austin, TX 78728*** | CEO / Founder | 100% |
|  |  |  |
|  |  |  |

**20.** **Former partners, directors, and shareholders.**

A. **If the entity filing bankruptcy is a partnership**, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

|  |  |
| --- | --- |
| ***NAME & ADDRESS*** | ***DATE OF WITHDRAWAL*** |
|  |  |

B. **If the entity filing bankruptcy is a corporation**, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

|  |  |  |
| --- | --- | --- |
| ***NAME & ADDRESS*** | ***TITLE*** | ***DATE OF TERMINATION*** |
| ***Raul Pineda***  ***14921 Babbling Brook Dr.***  ***Austin, TX 78728*** | CTO / IT Director | 08/16/2024 |

**21.** **Withdrawals from a partnership or distributions by a corporation.** **If the entity filing bankruptcy is a partnership or corporation**, list all withdrawals or distributions to an insider, including compensation in **ANY** form, bonuses: loans, stock redemptions, options exercised during one year immediately preceding the commencement of this case.

|  |  |  |  |
| --- | --- | --- | --- |
| ***NAME & ADDRESS OF RECIPIENT*** | ***RELATIONSHIP TO DEBTOR*** | ***DATE & PURPOSE OF WITHDRAWAL*** | ***AMOUNT OF MONEY OR DESCRIPTION & VALUE OF PROPERTY*** |
|  |  |  |  |

Creditors - LIST ALL CREDITORS, COLLECTION AGENCIES AND ATTORNEYS

*List* ***all debts*** *that you owe on this worksheet* ***including debts that you intend to continue to pay during and after the bankruptcy.***

*For all creditors, use the* ***correspondence*** *address in the two most recent communications from the creditor.*

**Mortgages:**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| PAYMENT AMOUNT: $ |
| MARKET VALUE OF PROPERTY: $ |
| ACCOUNT NUMBER: | LOAN DATE: |
| Address of property: | INTEREST RATE: |
| TYPE OF LOAN:  VA / FHA/ HUD/ Conventional |

Past due amounts on this debt:

|  |  |  |
| --- | --- | --- |
| NO OF MONTHS BEHIND ON PAYMENTS: | LATE FEES: $ | TOTAL ARREARAGE AMT: $ |
| PLEASE LIST SPECIFIC MONTHS NOT PAID: | | |

**Mortgages:**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| PAYMENT AMOUNT: $ |
| MARKET VALUE OF PROPERTY: $ |
| ACCOUNT NUMBER: | LOAN DATE: |
| Address of property: | INTEREST RATE: |
| TYPE OF LOAN:  VA / FHA/ HUD/ Conventional |

Past due amounts on this debt:

|  |  |  |
| --- | --- | --- |
| NO OF MONTHS BEHIND ON PAYMENTS: | LATE FEES: $ | TOTAL ARREARAGE AMT: $ |
| PLEASE LIST SPECIFIC MONTHS NOT PAID: | | |

**Unpaid property taxes:**

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| VALUE OF SECURITY $ | |
| SPECIFIC YEARS NOT PAID:: |  |
| ACCOUNT NUMBER: | Real property taxes? | Personal property taxes? |

**Unpaid property taxes:**

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| VALUE OF SECURITY $ | |
| SPECIFIC YEARS NOT PAID:: |  |
| ACCOUNT NUMBER: | Real property taxes? | Personal property taxes? |

**Vehicle loans:**

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT Amount: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| VEHICLE: (YEAR, BRAND, MODEL) | | |

Past due amounts on this debt:

|  |  |  |
| --- | --- | --- |
| NO OF MONTHS BEHIND ON PAYMENTS: | LATE FEES: $ | TOTAL ARREARAGE AMT: $ |
| PLEASE LIST SPECIFIC MONTHS NOT PAID: | | |

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT Amount: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| VEHICLE: (YEAR, BRAND, MODEL) | | |

Past due amounts on this debt:

|  |  |  |
| --- | --- | --- |
| NO OF MONTHS BEHIND ON PAYMENTS: | LATE FEES: $ | TOTAL ARREARAGE AMT: $ |
| PLEASE LIST SPECIFIC MONTHS NOT PAID: | | |

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT Amount: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| VEHICLE: (YEAR, BRAND, MODEL) | | |

Past due amounts on this debt:

|  |  |  |
| --- | --- | --- |
| NO OF MONTHS BEHIND ON PAYMENTS: | LATE FEES: $ | TOTAL ARREARAGE AMT: $ |
| PLEASE LIST SPECIFIC MONTHS NOT PAID: | | |

**Other secured loans (furniture, equipment, inventory, receivables)**

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT AMOUNT: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| ITEM(S) PURCHASED: | CONDITION OF COLLATERAL: GOOD, FAIR OR POOR | |

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT AMOUNT: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| ITEM(S) PURCHASED: | CONDITION OF C**OLLATERAL: GOOD, FAIR OR POOR** | |

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT AMOUNT: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| ITEM(S) PURCHASED: | CONDITION OF COLLATERAL: GOOD, FAIR OR POOR | |

|  |  |  |
| --- | --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ | |
| PAYMENT AMOUNT: $ | |
| NUMBER OF PAYMENTS LEFT ON LOAN: | |
| INTEREST RATE: | |
| ACCOUNT NUMBER: | DATE PURCHASED: | PURCHASE PRICE: |
| ITEM(S) PURCHASED: | CONDITION OF COLLATERAL: GOOD, FAIR, POOR | |

**Taxes owed to the IRS or other federal or state agencies**:

|  |  |  |  |
| --- | --- | --- | --- |
| CREDITOR NAME & ADDRESS  IRS | year owed | Amount: | Kind of tax(1040, 941...) |
| 2021 | $19,050.85 | 1120-S |
| 2022 | $11,106.29 | 1120-S |
| TAX PAYER ID#  EIN: 84-4331031 |  | $ |  |
| Tax Liens filed? (Yes or No) |  | $ |  |

**Unsecured debts (credit cards, medical, signature loans, utilities, etc). *If a debt has been sold or turned over to a collection agency, list the original creditor and the new creditor and the collection agency or attorney and list them separately. Do not try to fit the creditor and collection agency in the same space:***

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS  American Express – Delta Reserve credit card  PO Box 96001, Los Angeles, CA 90096 - 8000 | CURRENT BALANCE: $ 24,955 |
| DESCRIPTION OF DEBT:  Company Credit Card |
| ACCOUNT NUMBER:  Account Ending 3-71009 | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS  Pagel, Davis, Hill  1415 Louisiana 22nd floor  Houston, TX 77002 | CURRENT BALANCE: $56,592.81 |
| DESCRIPTION OF DEBT:  Business Lawyers |
| ACCOUNT NUMBER:  Leadingbit Solutions LLC | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS  Semple, Marchal & Cooper LLP | CURRENT BALANCE: $ 2,000 |
| DESCRIPTION OF DEBT:  CPA |
| ACCOUNT NUMBER:  15110.0 | |

**Unsecured debts (continued):**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

**Unsecured debts (continued):**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

**Unsecured debts (continued):**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

**Unsecured debts (continued):**

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

|  |  |
| --- | --- |
| CREDITOR NAME & ADDRESS | CURRENT BALANCE: $ |
| DESCRIPTION OF DEBT: |
| ACCOUNT NUMBER: | |

**CO-DEBTORS**

|  |
| --- |
| Do you have any debts which have been co-signed with parties other than the debtor, ie, guarantees)? If yes, complete the following information: |

|  |  |
| --- | --- |
| ***NAME AND ADDRESS OF CO-DEBTOR:*** | ***NAME AND ADDRESS OF CREDITOR:*** |

|  |  |
| --- | --- |
| ***NAME AND ADDRESS OF CO-DEBTOR:*** | ***NAME AND ADDRESS OF CREDITOR:*** |

|  |  |
| --- | --- |
| ***NAME AND ADDRESS OF CO-DEBTOR:*** | ***NAME AND ADDRESS OF CREDITOR:*** |

Leases and contracts:

|  |
| --- |
| Question |
| Does the debtor have any unexpired leases or contracts of any kind? Include any and all office/warehouse/store leases, car leases, etc., all rental agreements including copiers, postage machines, etc. If yes, list **all** parties to the contract and/or lease, describe the nature of the interest and **attach copies of the lease and/or contract to this package**. |

|  |  |
| --- | --- |
| ***DESCRIPTION (Type of contract/lease):*** | ***NAME AND ADDRESS OF CREDITOR:*** |

|  |  |
| --- | --- |
| ***DESCRIPTION (Type of contract/lease):*** | ***NAME AND ADDRESS CREDITOR:*** |

***Real Property Assets***

|  |  |
| --- | --- |
| ADDRESS: | AMOUNT OWED ON FIRST LIEN: $ |
| AMOUNT OWED ON SECOND LIEN: $ |
| MARKET VALUE OF PROPERTY: $ |
| TAX APPRAISAL VALUE: $ |
| LEGAL DESCRIPTION: | MONTHLY PAYMENT(S): $ $ |
| DATE OF PURCHASE: PURCHASE PRICE $ |
| LENDER: |
| TYPE OF LOAN: VA FHA OR CONVENTIONAL |

|  |  |
| --- | --- |
| ADDRESS OF PROPERTY: | AMOUNT OWED ON FIRST LIEN: $ |
| AMOUNT OWED ON SECOND LIEN: $ |
| MARKET VALUE: $ |
| TAX APPRAISAL VALUE: $ |
| LEGAL DESCRIPTION: | MONTHLY PAYMENT(S): $ $ |
| DATE OF PURCHASE: PURCHASE PRICE: |
| LENDER: |
| TYPE OF LOAN (VA, FHA OR CONVENTIONAL): |

***Personal Property Assets***

|  |  |  |
| --- | --- | --- |
|  | **Cash on hand** | **Value** |
| **1** | Enter amount of cash on hand. (**NOT** including bank accounts) | $ |

|  |  |
| --- | --- |
|  | **Bank and other Financial Accounts** |
| **2** | List all current bank accounts, certificates of deposit, shares in bank accounts or credit unions, money market accounts or any other institutions with which the debtor has an account. All bank accounts must be listed, including inactive accounts where the balance is very small. |

|  |  |
| --- | --- |
| ***FINANCIAL INSTITUTION*** | ***TYPE OF ACCOUNT***    ***checking / savings / other*** |
| ***BALANCE $*** |

|  |  |
| --- | --- |
| ***FINANCIAL INSTITUTION*** | ***TYPE OF ACCOUNT***  ***checking / savings / other*** |
| ***BALANCE $*** |

|  |  |
| --- | --- |
| ***FINANCIAL INSTITUTION*** | ***TYPE OF ACCOUNT***  ***checking / savings / other*** |
| ***BALANCE $*** |

|  |  |
| --- | --- |
|  | **Security deposits** |
| **3** | List all security deposits with utility companies, telephone companies, landlords or others. |

|  |  |
| --- | --- |
| ***NAME OF CREDITOR*** | ***AMOUNT OF DEPOSIT***  ***$*** |

|  |  |
| --- | --- |
| ***NAME OF CREDITOR*** | ***AMOUNT OF DEPOSIT***  ***$*** |

|  |  |
| --- | --- |
|  | **Accounts receivable** |
| **4** | **List any accounts receivable** or other money owed to you**.** |

|  |  |
| --- | --- |
| **NAME OF DEBTOR:** | **AMOUNT OWED:** |
| **ADDRESS OF DEBTOR:** | **PROBABLE COLLECTION? (Y/N):** |
| **IF THERE IS A LIENHOLDER, PLEASE GIVE THEIR NAME, ADDRESS AND THE AMOUNT OF THE LIEN:** | |
| **AMOUNT OF LIEN:** | |

|  |  |
| --- | --- |
|  | **Liquidated debts** |
| **5** | **List any liquidated debts** (a debt owing in a specific amount) owed to you that have not been previously listed. (Property you sold and took a note for all or part of the sale price). |

|  |  |
| --- | --- |
| ***NATURE OF DEBT:*** | ***AMOUNT OWED:*** |
| ***NAME AND ADDRESS OF DEBTOR:*** | ***DATE OF COLLECTION:*** |
| ***PROBABILITY OF COLLECTION?:*** |
| ***IF THERE IS A LIENHOLDER, PLEASE GIVE THEIR NAME, ADDRESS AND THE AMOUNT OF THE LIEN:*** | |
| ***AMOUNT OF LIEN:*** | |

|  |  |
| --- | --- |
|  | **Contingent and or unliquidated claims** |
| **6** | **List any other contingent and/or unliquidated claims**, including any other counterclaims, or rights to setoff claims. Include personal injury claims (car wreck, slip and fall, etc.), worker's compensation claims, and age/race/sex discrimination claims, and any class actions to which the debtor may be a party. |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | ***MARKET VALUE OF INTEREST:*** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Patents, copyrights or other intellectual property** | | |
| **7** | List any patents, copyrights, or other intellectual property. | | |
| ***DESCRIPTION:*** | | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Licenses, franchises or other intangibles** |
| **8** | List any licenses, franchises, or other intangibles, even if they have no value. (ie, realtors license, cosmetology license) |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | ***VALUE:*** |

|  |  |
| --- | --- |
|  | **Customer Lists** |
| **9** | If you had or have a business for which you maintained clients’ personal information (name, address, email address, phone number, social security number, credit card numbers or similar information) so indicate: |

|  |
| --- |
| ***Yes or No*** |

|  |  |
| --- | --- |
|  | **Automobiles, trucks, trailers, motorcycles and other vehicles** |
| **10** | **List all automobiles, trucks, motorcycles and other vehicles**.  \*\* If the debtor owns more than three vehicles, attach additional paper and provide the same information requested below. |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| \* YEAR OF VEHICLE: | \* MAKE and MODEL OF VEHICLE:  (ie, Chevrolet C1500 Silverado) | | | |  | | |
| DATE OF PURCHASE: | | | | |
| LOAN BALANCE: | | | | | | | |
| OPTIONS | | YES/NO | FOR OFFICE USE ONLY | OPTIONS | | YES/NO | FOR OFFICE USE ONLY | |
| \* MILEAGE(odometer): | |  |  | Four Wheel Drive | |  |  | |
| 4 Door | |  |  | Leather Seats | |  |  | |
| 2 Door | |  |  | Rear Air Conditioning/Heating | |  |  | |
| **\* \* DX, LX, EX, LS, XLT, etc..** | |  |  | Theft Deterrent System | |  |  | |
| Navigational System | |  |  | Running boards | |  |  | |
| Air Conditioning | |  |  | Luggage Rack | |  |  | |
| Custom Wheels | |  |  | Headache Rack | |  |  | |
| Power Locks | |  |  | Brush guard | |  |  | |
| Power Windows | |  |  | Sliding Rear Window | |  |  | |
| Power Seats | |  |  | Bed Liner (spray/plastic) | |  |  | |
| Cruise Control | |  |  | Extended Cab | |  |  | |
| Sunroof /Convertible | |  |  | Long bed or Short bed | |  |  | |
| Compact Disc Player | |  |  | Tow package | |  |  | |
| Automatic or Manual Transmission (Circle one) | |  |  | Rear entertainment system | |  |  | |
| Diesel or gasoline | |  |  | V6 / V8 / V10 | |  |  | |
| Major defects or problems: | |  | |  | |  |  | |

***\* These items are very important in determining value.***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| \* YEAR OF VEHICLE | \* MAKE and MODEL OF VEHICLE: | | |  | | | |
| DATE OF PURCHASE: | | | |
| LOAN BALANCE: | | | | | | | |
| \* OPTIONS | | YES/NO | OFFICE USE | | OPTIONS | YES/NO | OFFICE USE | |
| \* MILEAGE(odometer): | |  |  | | Four Wheel Drive |  |  | |
| 4 Door | |  |  | | Leather Seats |  |  | |
| 2 Door | |  |  | | Rear Air Conditioning/Heating |  |  | |
| **\* \* DX, LX, EX, LS, XLT,etc..** | |  |  | | Theft Deterrent System |  |  | |
| Navigational System | |  |  | | Running boards |  |  | |
| Air Conditioning | |  |  | | Luggage Rack |  |  | |
| Custom Wheels | |  |  | | Headache Rack |  |  | |
| Power Locks | |  |  | | Brush guard |  |  | |
| Power Windows | |  |  | | Sliding Rear Window |  |  | |
| Power Seats | |  |  | | Bed Liner (spray/plastic) |  |  | |
| Cruise control | |  |  | | Extended Cab |  |  | |
| Sunroof /Convertible | |  |  | | Long bed or Short bed |  |  | |
| Compact Disc Player | |  |  | | Tow package |  |  | |
| Automatic or Manual Transmission(Circle one) | |  |  | | Rear entertainment system |  |  | |
| Diesel or gasoline | |  |  | | V6 / V8 / V10 |  |  | |
| Major defects or problems | |  | | |  |  |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| \* YEAR OF VEHICLE: | \* MAKE and MODEL OF VEHICLE: | | |  | | | |
| DATE OF PURCHASE: | | | |
| LOAN BALANCE: | | | | | | | |
| OPTIONS | | YES/NO | OFFICE USE | | OPTIONS | YES/NO | OFFICE USE | |
| \* MILEAGE (odometer): | |  |  | | Four Wheel Drive |  |  | |
| 4 Door | |  |  | | Leather Seats |  |  | |
| 2 Door | |  |  | | Rear Air Conditioning/Heating |  |  | |
| **\* \* DX, LX, EX, LS, XLT,etc..** | |  |  | | Theft Deterrent System |  |  | |
| Navigational System | |  |  | | Running boards |  |  | |
| Air Conditioning | |  |  | | Luggage Rack |  |  | |
| Custom Wheels | |  |  | | Headache rack |  |  | |
| Power Locks | |  |  | | Brush guard |  |  | |
| Power Windows | |  |  | | Sliding Rear Window |  |  | |
| Power Seats | |  |  | | Bed Liner (spray/plastic) |  |  | |
| Cruise control | |  |  | | Extended Cab |  |  | |
| Sunroof /Convertible | |  |  | | Long bed or Short bed |  |  | |
| Compact Disc Player | |  |  | | Tow package |  |  | |
| Automatic or Standard Transmission (circle one) | |  |  | | Rear entertainment system |  |  | |
| Diesel or gasoline | |  |  | | V6 / V8 / V10 |  |  | |
| Major defects or problems | |  | | |  |  |  | |

|  |  |
| --- | --- |
|  | **Mobile Homes** |
| **11** | List all Mobile/Manufactured Homes. |

|  |  |  |
| --- | --- | --- |
| **MODEL YEAR:** | **MANUFACTURER::** | **MODEL:** |
| **DATE OF PURCHASE:** | | **DIMENSIONS (ie; 28 x 76):** |
| **LOAN BALANCE:** | | **MARKET VALUE:** |

|  |  |
| --- | --- |
|  | **Trailers** |
| **12** | List all utility trailers, stock/horse trailers, etc. |

|  |  |
| --- | --- |
| ***DESCRIPTION (year, make & model):*** | ***DATE OF PURCHASE:*** |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Boats, motors and their accessories and jet skis** |
| **13** | List any boats, motors, jet skis and their accessories. |

|  |  |
| --- | --- |
| ***DESCRIPTION (YEAR MODEL, MAKER, LENGTH):*** | ***DATE OF PURCHASE:*** |
| ***NAME OF LIENHOLDER AND PHONE NUMBER:***  ***( )*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Airplanes and their accessories** |
| **14** | List any airplanes and their accessories. |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | ***DATE OF PURCHASE:*** |
| ***NAME OF LIENHOLDER AND PHONE NUMBER:***  ***( )*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Office equipment, furnishings and supplies** |
| **15** | List office equipment, furnishings and supplies. Do not include desks, etc. used at home. Attach an itemized list and complete the following: |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Tools of trade, machinery, fixtures, equipment/supplies used in business** |
| **16** | List any tools of trade, machinery, fixtures, equipment, or supplies used in business not previously listed. Attach an itemized list of major items. |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
| **17** | **Inventory (Attach an itemized list.)** |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** | |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Animals** |
| **18** | **List all animals** including but not limited to horses, cows, pigs, etc. |

|  |
| --- |
| ***DESCRIPTION:*** |

|  |  |
| --- | --- |
|  | **Crops, farming equipment & supplies:** |
| **19** | **List any crops, farming supplies, or implements.** |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** |  |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

|  |  |
| --- | --- |
|  | **Other personal property** |
| **20** | **List other personal property** of any kind not previously scheduled. Describe the nature of the property. Include frequent flyer miles, websites, **domain names**. |

|  |  |
| --- | --- |
| ***DESCRIPTION:*** |  |
| ***NAME OF LIENHOLDER:*** | ***MARKET VALUE:*** |

This homework package was completed on \_\_11/18/2024\_\_\_\_\_\_.