

Name: \_\_\_\_\_ Case # \_\_\_\_\_ Date \_\_\_\_\_

## BUSINESS CASE QUESTIONNAIRE

### Office of David P. Cusick, Chapter 13 Trustee

**INSTRUCTIONS:** Complete all sides of the form, using additional pages if necessary. Be sure to include name, case number & question number on each additional page.

**\*\*\*\*\*IMPORTANT\*\*\*\*\***

This checklist, along with COPIES of all requested documents, must be sent to your attorney. Your attorney must send the requested documents to the Trustee's Office, via [bkdocs.us](http://bkdocs.us), no later than 10 working days prior to your First Meeting of Creditors.

If you are a Pro-Se debtor you must send the requested documents to the Trustee's Office, via [bkdocs.us](http://bkdocs.us), no later than 10 working days prior to your First Meeting of Creditors.

Please contact your attorney (if you have one) with any questions.

1. Do you have any employees? ☐ Yes ☐ No

(If so go to page 3 and complete the employee section.)

2. Is your company a :

- ☐ Sole Proprietorship
- ☐ Partnership
- ☐ Corporation

3. Do you have license requirements? ☐ Yes ☐ No

(If so, go to page 3 and complete the license section.)

4. In the operation of your business, is any insurance required? ☐ Yes ☐ No

(If so, go to page 3 and complete the insurance section.)

#### 5. DESCRIPTION OF BUSINESS

a) Name of business: \_\_\_\_\_

b) Address or location of  
business: \_\_\_\_\_

c) Describe the type of business you operate (nature of work performed or service 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 cash 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 lead you to file Chapter 13 Bankruptcy.
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## 6. DESCRIPTION OF ASSETS

- a) On a separate page, describe each item with a value of \$500 or over. Include the following items 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 & assuming a fair price. ("garage sale" value)).
  - Total of all inventory items with a value of \$500 or over.
- 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 or more canceled checks for this time period in order to clarify data contained on the bank statements).
- b) Are you the only authorized signatory on the account(s)? ☐ Yes ☐ No  
If no, specify who else is an authorized signer: \_\_\_\_\_

Bank Name	Account No.	Checking or Savings Account	Business or Personal Account

**8. LIST ALL FULL AND PART TIME EMPLOYEES**

Use a separate page if necessary.

Name of Employee	Position/Function	Mo. Salary/ Hourly Rate	P = Part Time F = Full Time

**9. TAX RETURNS**

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

- a) **COPIES** of the last 2 (two) years federal tax return with all supporting schedules, including any corporation and/or partnership taxes.
- b) **COPIES** of IRS form 941, EDD form DE-6 and proof of payment for the quarter ending prior to the filing of your Chapter 13 case, if you have any employees.
- c) **COPIES** of State Board of Equalization sales tax returns and proof of payment for the quarter ending prior to the filing of your Chapter 13 case.

**10. LICENSES**

If applicable to your business, provide **COPIES**, not originals, of the following:

- a.) Business Licenses-Is the license current? ☐ Yes ☐ No When is the expiration date? \_\_\_\_\_
- b.) Seller's Permit
- c.) Contractor's License and Bond 'card' associated with license.
- d.) Other \_\_\_\_\_

If you do not have any licenses, please explain why: \_\_\_\_\_

**11. INSURANCE**

You must provide **COPIES** of proof of the following:

- a) Declaration Page of business operation liability insurance
- b) Declaration Page of worker's compensation insurance
- c) Declaration Page of vehicle insurance
- d) Declaration Page liquor liability insurance
- e) Declaration Page of real and/or personal property insurance
- f) Other \_\_\_\_\_

**12. PROFIT AND LOSS STATEMENT**

Using the form on the back, provide a separate Profit and Loss Statement for each of the 6 months prior to filing your bankruptcy petition.

# PROFIT & 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:
  - 2(a) Purchases \$ \_\_\_\_\_
  - 2(b) Cost of Labor \$ \_\_\_\_\_  
(do not include employee salaries)
  - 2(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 & Maintenance .....\$ \_\_\_\_\_
  15. Miscellaneous Office Expense .....\$ \_\_\_\_\_
  16. Advertising .....\$ \_\_\_\_\_
  17. Travel & Entertainment.....\$ \_\_\_\_\_
  18. Professional Fees .....\$ \_\_\_\_\_
  19. Insurance
    - 19(a) Liability \$ \_\_\_\_\_
    - 19(b) Property \$ \_\_\_\_\_
    - 19(c) Vehicle \$ \_\_\_\_\_
    - 19(d) Worker's Compensation \$ \_\_\_\_\_
    - 19(e) Other \_\_\_\_\_ \$ \_\_\_\_\_
  20. Taxes
    - 20(a) Payroll \$ \_\_\_\_\_
    - 20(b) Sales \$ \_\_\_\_\_
    - 20(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 is true and correct to the best of my/our knowledge and belief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_