

Name: _____

Date: _____

Case Number: _____

BUSINESS CASE EXAMINATION QUESTIONNAIRE

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*******

All information must be in the form requested. Information and/or documents presented in an unorganized fashion will not be accepted and will result in the examination being delayed and/or rescheduled. This checklist along with COPIES of all requested documents must be provided to the Trustee at or before the Business Examination Interview.

Please contact your attorney if you have any questions.

1. DESCRIPTION OF BUSINESS

a) Name of business: _____

b) Address or location of business: _____

c) Are you leasing office space? Yes No
If yes, is it your intention to continue with the lease? Yes No

d) When did the current business start operating? _____

e) Describe the type of business you operate (nature of work performed or service provided):

f) Is your business seasonal? Yes No
If yes, specify your good and bad months: _____

g) Is your company a:
 Sole Proprietorship
 Partnership
 Corporation

h) Name(s) of owners: _____

i) If this is a joint case, are both debtors engaged in the same business? N/A Yes No

j) Are you leasing any business equipment? Yes No
 If yes, identify the type of equipment, creditor's name and terms of the lease:

k) Have you pledged your receivables, rents profits, or other cash as collateral for any loans?
 Yes No

l) 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:

2. 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 accounts receivables to be? \$ _____

d) If you were to buy your business today, how much would you pay for it? \$ _____

3. 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

4. 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

5. TAX RETURNS

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

- a) **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.
- b) **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.
- c) **COPIES** of your most recent federal tax return with all supporting schedules.

6. LICENSES

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

- a.) Business Licenses
- 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: _____

7. 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 _____

8. STATEMENTS

Using the form on the back, provide a Profit and Loss Statement for last or most recent month.

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: _____