

# JOHN W. HARGRAVE & ASSOCIATES

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## INITIAL CONSULTATION AGREEMENT

Thank you for coming to the Law Offices of John W. Hargrave & Associates. This letter is our initial consultation agreement.

I understand that I have come to the Law Offices of John W. Hargrave & Associates to discuss a legal situation.

I understand that by signing this initial consultation agreement, I am not retaining the Law Offices of John W. Hargrave & Associates, nor am I entitled to have any work done by the law firm until a retainer agreement is executed by all parties.

I understand that there will be no charge for this initial consultation which shall be a maximum of one (1) hour. After one hour, Mr. Hargrave may, at his discretion, extend the length of the free consultation or may advise me that any further discussions will be billed at his then applicable hourly rate after I sign a separate written engagement/retainer agreement.

For an initial free bankruptcy consultation, Mr. Hargrave shall provide the following services:

- A. To the extent possible, based on the information provided by you, advise you of the available options as to bankruptcy.
- B. If you have not provided Mr. Hargrave with sufficient information which is needed to advise you as to your options, then Mr. Hargrave shall inform you what information you need to provide to enable him to provide such advise and information.
- C. Advise you of the requirements placed upon the Client to file a Chapter 7 or 13 bankruptcy.
- D. To the extent possible, quote you an estimated fee for the Firm's services to provide bankruptcy assistance or other legal services (if applicable) to you.

I further acknowledge that the first date upon which the Law Offices of John W. Hargrave & Associates has first offered to provide me with bankruptcy assistance is this date and Mr. Hargrave has provided me with the following:

- 1) Notice mandated by Section 527(a)(2) of the Bankruptcy Code; and
- 2) Notice mandated by Section 527(b) of the Bankruptcy Code.

**JOHN W. HARGRAVE & ASSOCIATES**

Dated:

By:

JOHN W. HARGRAVE, ESQUIRE

Acknowledged:

X \_\_\_\_\_

X \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

# HOUSEHOLD INCOME

NAME _____		SPOUSE NAME _____	
Occupation:		Spouse's Occupation:	
Employer's Name:		Employer's Name:	
How Long Employed There ?:		How Long Employed There ?:	
Address:		Address:	
<b>DEPENDENTS</b>			Marital Status:
Name	Age	Relationship	
			<input type="checkbox"/> Married <input type="checkbox"/> Single
			<input type="checkbox"/> Separated <input type="checkbox"/> Divorced
			<input type="checkbox"/> Separate Expenses
<b>INCOME</b>		<b>YOU</b>	<b>SPOUSE</b>
		Pay Period (how often) <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly	Pay Period (how often) <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly
<b>EARNINGS PER PAY PERIOD</b>			
Gross Pay per Pay Period			
Estimated Overtime per Pay Period			
<b>PAYROLL DEDUCTIONS PER PAY PERIOD</b>			
Payroll Taxes and Social Security			
Insurance			
Union Dues			
Retirement			
Pension Loans			
Alimony/Child Support			
Other Deductions:			
<b>TAKE HOME PAY PER PAY PERIOD</b>			
Regular Income from Business			
Income from Real Property			
Pension and Retirement Income			
Alimony Received			
Soc. Sec./Govt. Assist., explain:			
Other Monthly Income:			
Other Monthly Income:			
Other Monthly Income:			
<b>TOTAL COMBINED MONTHLY INCOME</b>			

## MONTHLY EXPENSES

<b>HOUSING EXPENSES</b>		
Rent or 1 <sup>st</sup> mortgage payment .....	\$ _____	
2 <sup>nd</sup> mortgage/home equity loan .....	\$ _____	
Home maintenance (repairs and upkeep) .....	\$ _____	
Electricity .....	\$ _____	
Heat .....	\$ _____	
Water / Sewer (monthly) .....	\$ _____	
Cable .....	\$ _____	
Telephone .....	\$ _____	
Cell Phones .....	\$ _____	
Internet Access .....	\$ _____	
Real Estate Taxes (not included in mtg) .....	\$ _____	
<b>TOTAL HOUSING EXPENSES</b>		

<b>FOOD, CLOTHING, MEDICAL</b>		
Food - Groceries .....	\$ _____	
Outside Meals .....	\$ _____	
Clothing .....	\$ _____	
Health Insurance (not paid out of pay check) .....	\$ _____	
Medical, dental and prescription costs & co-pays ..	\$ _____	
Alimony, maintenance, and support paid to others ..	\$ _____	
Day care expenses & Babysitting expenses .....	\$ _____	
<b>TOTAL FOOD, CLOTHING, MEDICAL EXPENSES</b>		<b>\$ _____</b>

<b>TRANSPORTATION</b>		
Gas .....	\$ _____	
Insurance .....	\$ _____	
Maintenance & Repairs .....	\$ _____	
Tolls/Parking .....	\$ _____	
Auto #1 .....	\$ _____	
Auto #2 .....	\$ _____	
<b>TOTAL TRANSPORTATION EXPENSES</b>		<b>\$ _____</b>

<b>OTHER DEBT PAYMENTS</b>		
Student Loans .....	\$ _____	
Computers/TV's & Other Appliances .....	\$ _____	
Furniture Loans .....	\$ _____	
Credit Cards (minimum monthly payment) .....	\$ _____	
<b>TOTAL OTHER DEBT PAYMENTS</b>		<b>\$ _____</b>

MISCELLANEOUS	
Education (including tuition & school books) . . . . .	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
<b>TOTAL MISCELLANEOUS PAYMENTS</b>	<b>\$ _____</b>

<b>TOTAL MONTHLY EXPENSES</b> . . . . .	\$ _____
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**SUMMARY**

**Net Household Income** \$ \_\_\_\_\_

Household Expenses \$ \_\_\_\_\_

**CASH FLOW** → → → → → → → → → → \$ \_\_\_\_\_

# Quick Summary Form

<b>HOUSE</b>  2 <sup>nd</sup> property - check box <span style="float: right;"><input type="checkbox"/></span>	Who owns it <small>circle answer</small> H - W - Both- Other
Address	What do you think its worth?

<b>Mortgages/Home Equity Loans</b> Name of company Abbreviate	How much is owed approximately	How many payments behind 0-1-2-3-more
#1		_____ foreclosure started? Y or N If Y, when _____
#2		_____ foreclosure started? Y or N If Y, when _____

<b>Cars</b> Year/Make/Model	Financed or Leased Approx Amount Owed	How many payments behind 0-1-2-3-more
#1		
#2		

<b>Credit Cards</b>	How Many	Total Amount Owed
You		
Spouse		
Jointly		

<b>Other things you are financing</b>		
<b>Furniture/Appliances Electronics/Other</b>	<b>Balance Owed / Monthly Payment</b>	<b>How many payments behind 0-1-2-3-more</b>

<b>Student Loans</b>			
		<b>Balance Owed / Monthly Payment</b>	<b>Payment Status paying/deferred</b>
H			
W			

<b>Income Taxes</b>			
<b>Year</b>	<b>H/W joint</b>	<b>Balance Owed / Monthly Payment</b>	<b>Payment Status paying/deferred</b>
2010			
2009			
2008			
Older			

<b>Alimony / Child Support</b>			
		<b>Balance Owed / Monthly Payment</b>	<b>How many payments behind</b>
H			
W			

<b>OTHER</b>		
Motor Vehicle Surcharges	H	W
Medical Bills	H	W

## Personal Property (Schedule B)

Type of Property	Description & Location	YARD SALE VALUE
1. Cash on hand	<b>Cash on Hand</b>	<b>how much cash is in your pocket</b>
2. Checking/savings account, certificates of deposit, other bank accounts	<b>Bank Name &amp; Acct #</b>	<b>Balance in accts</b>
3. Security deposits held by utility companies, landlord, or others		
4. Household goods, furniture, including audio, video, and computer equipment	<b>Household goods</b> itemize any item worth more than \$500.00	<b>Yard sale value/ craigs list</b>
5. Books, pictures, art objects, records, compact discs, collectibles	itemize any item worth more than \$500.00	<b>Yard sale value/ craigs list</b>
6. Clothing		<b>Yard sale value</b>
7. Furs and jewelry	itemize any item worth more than \$500.00	<b>Yard sale value</b>
8. Sports, photographic, hobby equipment, firearms	itemize any item worth more than \$500.00	<b>Yard sale value/ craigs list</b>
9. Interest in insurance policies-specify refund or cancellation value	<b>Do you have any life insurance policies - Term or Whole (circle one)</b>	<b>For Whole Life Policies, list cash surrender value</b>

Type of Property	Description & Location	<b>YARD SALE VALUE</b>
10. Annuities		
11. Interests in pension or profit sharing plans	<b>Do you have IRA/401K or Pension</b>	<b>Supply statement</b>
12. Stock and interests in incorporated/unincorporated business	<b>Do you now own a business, including self-employment?</b>	
13. Interests in partnerships/joint ventures		
14. Bonds		
15. Accounts receivable		
16. Alimony/family support to which you are entitled		
17. Other liquidated debts owed to you, including tax refunds		
18. Equitable or future interests or life estates		
19. Interests in estate of decedent or life insurance plan or trust		
20. Other contingent/unliquidated claims, including tax refunds, counterclaims	<b>Car accidents/slip &amp; fall claims</b>	
21. Patents, copyrights, other intellectual property		
22. Licenses, franchises		
23. Automobiles, trucks, trailers, and accessories.	<b>Year, make &amp; model of vehicles</b>	



Type of Property	Description & Location	YARD SALE VALUE
24. Boats, motors, and accessories	<b>Year, make &amp; model</b>	
25. Aircraft and accessories		
26. Office equipment, supplies		
27. Machinery, fixtures etc. for business		
28. Inventory		
29. Animals	<b>Do you have any pedigree animals?</b>	
30. Crops-growing or harvested		
31. Farming equipment and implements		
32. Farm supplies, chemicals,		
33. Other personal property of any kind not listed <b>that is worth more than \$500.00.</b>	<b>itemize any item worth more than \$500.00</b>	

## Statement of Financial Affairs

**1. Income from employment (wages/tips) or operation of business (commissions)**  
*(Including Severance Pay & Tax Refunds)*

Period	\$ Amount
2012 Year to date Income (h) <i>Provide pay stubs for last 60 days</i>	
2012 Year to date Income (w) <i>Provide pay stubs for last 60 days</i>	
2011 Income <i>Provide copy tax return</i>	
2010 Income <i>Provide copy tax return</i>	

**2. Income other than from employment -- (ie unemployment/pension/social security/worker's compensation & temporary disability)**

Period	\$ Amount
2012 Year to date Income (h)	
2012 Year to date Income (w)	
2011 Income <i>Provide copy tax return</i>	
2010 Income <i>Provide copy tax return</i>	

3. List all payments on loans, installment purchases of goods or services, and other debts, totaling more than \$600 to any creditor made within the last **90 days** .

Name and Address of Creditor and Relationship to You	Dates of Payment	Amount Paid	Amount Still Owed

4. Have you repaid any loans you made to a **family member** in the last **year** .

Name and Address of Family Member and Relationship to You	Dates of Payment	Amount Paid	Amount Still Owed

5. Law suits, executions, garnishments and attachments

a) Provide copy of all lawsuits filed against you, **or you have against others.**

b) Describe all property that has been garnished, seized, or attached under any legal or equitable process within the **last year**.

NONE *(Give us copies of pleadings or sheriff notices)*

Name and Address of Person/Company for Whom the Property Was Seized (Creditor)	Date of Seizure	Description and Value of Property

**6. Repossessions, foreclosures, and returns**

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller, within **the last year** .

NONE *(Provide Documents)*

Name and Address of Creditor	Date of Repossession, Foreclosure, Transfer or Return	Description and Value of Property

**7. Gifts**

List all gifts to family or friends or charitable contributions made within **one year** more than \$200.00 to any person.

NONE

Name and Address of Recipient	Relationship to You, if Any	Date of Gift	Description and Value of Gift

**8. Losses**

List all losses from fire, theft, gambling or other casualty within **the last year**.

NONE

Description and Value of Property	Description of Circumstances and Amount Covered by Insurance, if Any	Date of Loss

**Gambling losses - get records of winnings and losses from casino.**

**9. Other transfers (including a gift or sale of something you owned that was worth more than \$500.00)**

List all other property, other than property transferred in your ordinary course of business or financial affairs, transferred either absolutely or as a security within the last **two years** .

NONE

Name and Address of Transferee and Relationship to You	Date of Transfer	Description of Property Transferred and Value Received

**10. Closed financial accounts**

List all financial accounts (bank accounts) and instruments held in your name or for your benefit which were closed, sold, or otherwise transferred within **the last year**.

NONE

Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing

**11. Property held for another person - are you storing or holding anything that belongs to someone else.**

List all property that you hold or control that is owned by another person.

NONE

<b>Name and Address of Owner</b>	<b>Description and Value of Property</b>	<b>Location of Property</b>

**12. Prior address**

If you have moved within the last **two years**, list all residences during the last two years, excluding your present address.

NONE

<b>Address</b>	<b>Your Name at the Time</b>	<b>Dates of Occupancy</b>

**13. List any business that you have had an ownership interest in in the last six (6) years.**

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NONE

<b>Business Name</b>	<b>Nature of Business</b>	<b>Beginning &amp; Ending Dates</b>