

S. W. HOPKINS & ASSOCIATES INC.

Helping solve financial difficulties

Personal Information Form

Date: _____

You:

Name: _____
AKA name: _____
Address: _____
City: _____
County: _____ Province: _____
Postal Code: _____

Phone home: _____ Phone work: _____
Phone cell: _____
Email: _____

How long at this address? _____
Number of people at this address: _____
Number of people 17 or under: _____

Marital Status: Single, Married, Common Law, Separated, Divorced, _____
S.I.N Number: _____ Birth Date: _____
Level of education: _____
Occupation: _____
Employer: _____

Spouse:

Name: _____
AKA name: _____
Address: _____
City: _____
County: _____ Province: _____
Postal Code: _____

Phone home: _____ Phone work: _____
Phone cell: _____
Email: _____

How long at this address? _____
Number of people at this address: _____
Number of people 17 or under: _____

Marital Status: Single, Married, Common Law, Separated, Divorced, _____
S.I.N Number: _____ Birth Date: _____
Level of education: _____
Occupation: _____
Employer: _____

Dependents:

Name	Relationship (Son, Dtr, etc.)	Date of birth

Assets- Includes all items that you own:

3

Cash on hand

Cash in the bank

Life Insurance Policies:

Company Name	Policy Number	Beneficiary	Type

Amount

Investments - (RRSP's, RESP's, Stocks, Bonds, etc.)

Company Name	Policy Number	Beneficiary	Type

Amount

Vehicles (Cars, trucks, trailers, RV's, motorcycles, snowmobiles, etc.)

Year	Make	Model	Serial number	Mileage	Financed with:

Value

Real Estate

Address	% ownership	Other owner(s)	Financed with:

Value

Other assets:

Assets - Household furniture and personal effects:

Estimated Value is not cost or replacement cost, but rather "auction" or "garage sale" value.

	Estimated Value		Estimated Value
Kitchen		Bedroom 1	
Table		Bed	
Chairs		Dresser	
Small appliances		Other	
Dishes			
Pots and pans		Bedroom 2	
Microwave		Bed	
Refridgerator		Dresser	
Stove		Other	
Freezer			
Other		Bedroom 3	
		Bed	
		Dresser	
		Other	
Dining Room			
Table		Office in home	
Chairs		Desk	
Cabinet		Chair	
China		Other	
Silver			
Other		Outside items	
		Barbeque	
		Furniture	
Living room		Lawnmower	
Sofa		Other	
Chair			
Tables		Other items	
TV		Musical instruments	
Stereo		Recreational equipment (golf, skiing, etc.)	
Electronics		Collections (eg: coins, stamps, etc.)	
Piano/organ		Other	
Other			
Personal effects			
Cloths, wedding band, etc.			

Grand Total both columns:

--

Under other please also consider: Furs, antiques, artwork, firearms, etc.

Monthly Income

	You	Spouse
Net employment income		
Net pension/annuities		
Net child support		
Net spousal support		
Net EI benefits		
Net social assistance		
Net self employment		
Net Disability		
Child tax benefit		
Rental income		
Other income		
Total monthly net income		

Monthly Non-discretionary Expenses

Child support payments	
Spousal support payments	
Child care	
Medical condition Expenses	
Fines/penalties imposed by Court	
Expenses as a condition of employment	
Debts wehre stay has been lifted	
Other expenses	
Total monthly non-discretionary expenses	

Monthly Discretionary Expenses

Housing	
Rent/mortgage	
Property taxes/condo fees	
Heating/gas/oil	
Telephone	
Cable	
Power	
Water	
Furniture	
Other	

Monthly Discretionary Expenses - Continued

Personal expenses	
Smoking	
Alcohol	
Dining/lunches/restaurants	
Entertainment/sports	
Gifts/charitable donations	
Allowances	
Other	
Non-recoverable medical expenses	
Prescriptions	
Dental	
Other	
Living expenses	
Food/grocery	
Laundry/Dry Cleaning	
Grooming/toiletries	
Clothing	
Other	
Transportation expenses	
Car lease/payments	
Repair/maintenance/gas	
Public Transportation	
Other	
Insurance expenses	
Vehicle	
House	
Furniture/contents	
Life insurance	
Other	
Payments	
Payments to the estate	
To Secured creditor	
Other	
Total Monthly Discretionary Expenses	
Monthly Surplus (Deficit)	