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BANKRUPTCY REFERRAL FORM

CLIENT NAME: _____
STREET ADDRESS: _____
CITY, STATE, ZIP _____
TELEPHONE # _____
CONTACT NAME _____

BORROWER NAME _____ CO-BORROWER NAME _____
STREET ADDRESS _____ STREET ADDRESS _____
CITY, STATE, ZIP _____ CITY, STATE, ZIP _____
SOCIAL SECURITY # _____ SOCIAL SECURITY # _____

BANKRUPTCY CASE NO. _____

DEBT INFORMATION

CLIENT ACCOUNT # _____ ARREARAGE at time of bankruptcy filing
(real estate loan only) \$ _____

DATE OF CONTRACT OR SERVICES	_____	INTEREST RATE	_____
CURRENT PRINCIPAL BALANCE	\$ _____	DATE OF LAST PAYMENT	_____
ACCRUED INTEREST	\$ _____	DATE NEXT PAYMENT DUE	_____
LATE CHARGES	\$ _____	PAYMENT AMOUNT	_____
TOTAL DUE	\$ _____		

Please furnish the following for all new bankruptcy cases:

- A. Promissory note, Dealer Contract, or other debt instrument (if applicable)
- B. Vehicle title, Notice of Lien or Deed of Trust (if applicable)

INSTRUCTIONS TO ATTORNEY:

_____ File Proof of Claim
_____ Prepare and file Motion for Relief from Stay
_____ Prepare Reaffirmation Agreement.

AUTHORIZED SIGNATURE

DATE OF REFERRAL