

\_\_\_\_\_ EIB

\_\_\_\_\_ NEIB

**RUSSELL BROWN, TRUSTEE**  
**SELF EMPLOYMENT QUESTIONNAIRE**

**You must return this completed Questionnaire at your meeting of creditors!**

Name(s) of Debtor(s): \_\_\_\_\_

Case Number: \_\_\_\_\_

Date: \_\_\_\_\_, 200\_\_\_\_.

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A review of your petition, schedules, and statement of financial affairs indicates that you are self employed. The Trustee is making this request pursuant to §§ 521(4), 1106 and 1304 of the Bankruptcy Code. This Questionnaire is to help the Trustee gain information about your self employment activities. If this is a husband and wife case, and both of you are self employed in **different** self employments, then both of you must complete a separate Questionnaire. If both husband and wife are engaged in the same self employment or business, then you need complete only one Questionnaire. Depending on the nature of your business activities, the Trustee may need to get additional information and documents from you. This Questionnaire uses the terms "self employment " and "business" interchangeably. Please keep in mind:

- All information you provide must be complete and accurate. Failure to completely and accurately answer the questions may cause the Trustee to file a motion to dismiss your case.
- The Questionnaire must have the original signature of each debtor, even if the husband or wife is not involved in the business or self employment.
- You must return the completed Questionnaire to the Trustee at your meeting of creditors.

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(1) Are you still self employed? Yes \_\_\_\_\_ No \_\_\_\_\_

(2) If no, when and why did you cease being self employed?

\_\_\_\_\_

**\*\*\* If you are no longer self employed, you may skip to the end at page two. Sign and date the Questionnaire.**

(3) Description. Describe your self employment or business, and provide the name of the business:

\_\_\_\_\_

(4) Joint Case. If this is a joint debtor case, are both of you engaged in the same business? N/A \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

(5) Type. Indicate the type of business ownership and indicate percent of ownership:

\_\_\_\_\_ Sole Proprietorship      \_\_\_\_\_ Partnership      \_\_\_\_\_ Corporation      \_\_\_\_\_ L.L.C.

(5A) If the business is a partnership or incorporated, provide the names of the other partners or shareholders.

\_\_\_\_\_

- (6) Do you have any part-time or full-time employees? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, how many employees? \_\_\_\_\_
- (7) Do you incur any trade credit in the operation of your business? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Trade credit is any short-term debt incurred in the ordinary course of operating your business.)
- (8) Do you have an inventory of products to sell? Yes \_\_\_\_\_ No \_\_\_\_\_
- (9) Have you incurred or do you expect to incur long-term trade debt since you filed your case? Yes \_\_\_\_\_ No \_\_\_\_\_
- (10) Do you lease commercial real property? Yes \_\_\_\_\_ No \_\_\_\_\_
- (11) Do you own or lease business property, including office equipment, furnishings, or supplies? Yes \_\_\_\_\_ No \_\_\_\_\_
- (12) Do you own any real property which you rent to someone else? Yes \_\_\_\_\_ No \_\_\_\_\_
- (13) Do you pay any payroll taxes, sales taxes, real estate taxes or personal property taxes from the operation of your business? Yes \_\_\_\_\_ No \_\_\_\_\_
- (14) Do you maintain business or liability insurance for your business? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, describe the nature of the insurance: \_\_\_\_\_

**I/We declare under penalty of perjury that the answers in this Self Employment Questionnaire are true and correct to the best of my/our knowledge.**

\_\_\_\_\_  
Signature of Debtor

\_\_\_\_\_  
Signature of Codebtor