SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of North Carolina

Case number (*If known*): _____

Chapter you are filing under:
- ☑ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Renee First name A Middle name Holloway Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and *doing business as* names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	First name Middle name Last name First name Middle name Last name Business name (if applicable) Business name (if applicable)	First name Middle name Last name First name Middle name Last name Business name (if applicable) Business name (if applicable)
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx – xx – 4 3 2 0 OR **9** xx – xx – ____ ____ ____ ____	xxx – xx – ____ ____ ____ ____ OR **9** xx – xx – ____ ____ ____ ____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Your Employer Identification Number (EIN), if any.	__ __ – __ __ __ __ __ __ __ EIN __ __ – __ __ __ __ __ __ __ EIN	__ __ – __ __ __ __ __ __ __ EIN __ __ – __ __ __ __ __ __ __ EIN
5. Where you live	418 Larkspur Ct Apt 2B Number Street Wilmington NC 28403 City State ZIP Code New Hanover County County **If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address. Number Street P.O. Box City State ZIP Code	**If Debtor 2 lives at a different address:** Number Street City State ZIP Code County **If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address. Number Street P.O. Box City State ZIP Code
6. Why you are choosing *this district* to file for bankruptcy	*Check one:* ☑ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	*Check one:* ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☑ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

8. How you will pay the fee

- ☑ **I will pay the entire fee when I file my petition**. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments**. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- ☑ No
- ☐ Yes. District _____ When _____ Case number _____
  MM / DD / YYYY
  District _____ When _____ Case number _____
  MM / DD / YYYY
  District _____ When _____ Case number _____
  MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☑ No
- ☐ Yes. Debtor _____ Relationship to you _____
  District _____ When _____ Case number, if known_____
  MM / DD / YYYY
  Debtor _____ Relationship to you _____
  District _____ When _____ Case number, if known_____
  MM / DD / YYYY

11. Do you rent your residence?

- ☐ No. Go to line 12.
- ☑ Yes. Has your landlord obtained an eviction judgment against you?
  - ☑ No. Go to line 12.
  - ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☑ No. Go to Part 4.

☐ Yes. Name and location of business

_____
Name of business, if any

_____
Number Street

_____

_____ _____ _____
City State ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor*?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☑ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☑ No

☐ Yes. What is the hazard? _____

_____

If immediate attention is needed, why is it needed? _____

_____

Where is the property? _____
Number Street

_____

_____ _____ _____
City State ZIP Code

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☐ No. Go to line 16b.
- ☑ Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
- ☐ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

_____

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☐ No. I am not filing under Chapter 7. Go to line 18.
- ☑ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
  - ☑ No
  - ☐ Yes

18. How many creditors do you estimate that you owe?

- ☑ 1-49
- ☐ 50-99
- ☐ 100-199
- ☐ 200-999
- ☐ 1,000-5,000
- ☐ 5,001-10,000
- ☐ 10,001-25,000
- ☐ 25,001-50,000
- ☐ 50,001-100,000
- ☐ More than 100,000

19. How much do you estimate your assets to be worth?

- ☑ $0-$50,000
- ☐ $50,001-$100,000
- ☐ $100,001-$500,000
- ☐ $500,001-$1 million
- ☐ $1,000,001-$10 million
- ☐ $10,000,001-$50 million
- ☐ $50,000,001-$100 million
- ☐ $100,000,001-$500 million
- ☐ $500,000,001-$1 billion
- ☐ $1,000,000,001-$10 billion
- ☐ $10,000,000,001-$50 billion
- ☐ More than $50 billion

20. How much do you estimate your liabilities to be?

- ☑ $0-$50,000
- ☐ $50,001-$100,000
- ☐ $100,001-$500,000
- ☐ $500,001-$1 million
- ☐ $1,000,001-$10 million
- ☐ $10,000,001-$50 million
- ☐ $50,000,001-$100 million
- ☐ $100,000,001-$500 million
- ☐ $500,000,001-$1 billion
- ☐ $1,000,000,001-$10 billion
- ☐ $10,000,000,001-$50 billion
- ☐ More than $50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

✘ _____
Signature of Debtor 1

Executed on _____
MM / DD / YYYY

✘ _____
Signature of Debtor 2

Executed on _____
MM / DD / YYYY

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

✘ _____ Date _____
Signature of Attorney for Debtor MM / DD / YYYY

_____
Printed name

_____
Firm name

_____
Number Street

_____

_____ _____ _____
City State ZIP Code

Contact phone _____ Email address _____

_____ _____
Bar number State

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- ☐ No
- ☑ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

- ☐ No
- ☑ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- ☑ No
- ☐ Yes. Name of Person_____.
  Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

✘ _____	✘ _____
Signature of Debtor 1	Signature of Debtor 2
Date _____ MM / DD / YYYY	Date _____ MM / DD / YYYY
Contact phone 910-555-0114	Contact phone _____
Cell phone 910-555-0115	Cell phone _____
Email address renee.holloway@example.com	Email address _____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. *Schedule A/B: Property* (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from *Schedule A/B*	$ 0.00
1b. Copy line 62, Total personal property, from *Schedule A/B*	$ 11990.00
1c. Copy line 63, Total of all property on *Schedule A/B*	$ 11990.00

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)	
2a. Copy the total you listed in Column A, *Amount of claim,* at the bottom of the last page of Part 1 of *Schedule D*	$ 0.00
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*	$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*	+ $ 25490.00
Your total liabilities	$ 25490.00

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I) Copy your combined monthly income from line 12 of *Schedule I*	$ 2670.00
5. *Schedule J: Your Expenses* (Official Form 106J) Copy your monthly expenses from line 22c of *Schedule J*	$ 2570.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☑ Yes

7. **What kind of debt do you have?**

☑ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts**. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the *Statement of Your Current Monthly Income***: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. $ 3450.00

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F***:

	Total claim
From Part 4 on *Schedule E/F*, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	$ 0.00
9d. Student loans. (Copy line 6f.)	$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ $ 0.00
9g. **Total.** Add lines 9a through 9f.	$ 0.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case and this filing:

Debtor 1: Renee A Holloway
First Name | Middle Name | Last Name

Debtor 2 (Spouse, if filing): _____
First Name | Middle Name | Last Name

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number:

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. **Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

☑ No. Go to Part 2.
☐ Yes. Where is the property?

1.1. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.
☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____
Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
_____

☐ **Check if this is community property** (see instructions)

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.
☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____
Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
_____

☐ **Check if this is community property** (see instructions)

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

1.3. _____
Street address, if available, or other description

_____

_____
City State ZIP Code

_____
County

What is the property? Check all that apply.

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____

Current value of the portion you own? $_____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

_____

☐ **Check if this is community property** (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.** ..... ➔ $ 0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
- ☑ Yes

3.1. Make: Honda
Model: Civic
Year: 2013
Approximate mileage: 128000
Other information:

Who has an interest in the property? Check one.

- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $ 4200.00

Current value of the portion you own? $ 4200.00

If you own or have more than one, describe here:

3.2. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $_____

Current value of the portion you own? $_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

3.3. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

3.4. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☑ No
- ❑ Yes

4.1. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

If you own or have more than one, list here:

4.2. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$_____	$_____

5. **Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** ..... ➔ $ 4200.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6. **Household goods and furnishings** *Examples*: Major appliances, furniture, linens, china, kitchenware		
☐ No ☑ Yes. Describe.....	Sofa, beds, dresser, kitchen table, dishes	$ 2800.00
7. **Electronics** *Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
☐ No ☑ Yes. Describe.....	TV, laptop, two phones	$ 600.00
8. **Collectibles of value** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
☑ No ☐ Yes. Describe.....		$
9. **Equipment for sports and hobbies** *Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
☑ No ☐ Yes. Describe.....		$
10. **Firearms** *Examples:* Pistols, rifles, shotguns, ammunition, and related equipment		
☑ No ☐ Yes. Describe.....		$
11. **Clothes** *Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
☐ No ☑ Yes. Describe.....	Everyday clothing for me and my son	$ 700.00
12. **Jewelry** Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
☐ No ☑ Yes. Describe.....	Watch, earrings	$ 250.00
13. **Non-farm animals** *Examples:* Dogs, cats, birds, horses		
☑ No ☐ Yes. Describe.....		$
14. **Any other personal and household items you did not already list, including any health aids you did not list**		
☑ No ☐ Yes. Give specific information.....		$
15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** ..... ➔		$ 4350.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**
Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No
☑ Yes..... Cash: ..... $ 60.00

17. **Deposits of money**
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No
☑ Yes..... Institution name:

17.1. Checking account:	Harborview Credit Union	$ 640.00
17.2. Checking account:		$
17.3. Savings account:	Harborview Credit Union	$ 310.00
17.4. Savings account:		$
17.5. Certificates of deposit:		$
17.6. Other financial account:		$
17.7. Other financial account:		$
17.8. Other financial account:		$
17.9. Other financial account:		$

18. **Bonds, mutual funds, or publicly traded stocks**
Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☑ No
☐ Yes..... Institution or issuer name:

_____ $ _____
_____ $ _____
_____ $ _____

19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☑ No
☐ Yes. Give specific information about them. .....

Name of entity:	% of ownership:	
_____	_____%	$ _____
_____	_____%	$ _____
_____	_____%	$ _____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☑ No
☐ Yes. Give specific information about them. .....

Issuer name:

_____ $_____
_____ $_____
_____ $_____

21. **Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☑ No
☐ Yes. List each account separately..

Type of account: Institution name:

401(k) or similar plan: _____ $_____
Pension plan: _____ $_____
IRA: _____ $_____
Retirement account: _____ $_____
Keogh: _____ $_____
Additional account: _____ $_____
Additional account: _____ $_____

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No
☑ Yes.....

Institution name or individual:

Electric: _____ $_____
Gas: _____ $_____
Heating oil: _____ $_____
Security deposit on rental unit: Larkspur Court Apartments LLC $950.00
Prepaid rent: _____ $_____
Telephone: _____ $_____
Water: _____ $_____
Rented furniture: _____ $_____
Other: _____ $_____

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☑ No
☐ Yes.....

Issuer name and description:

_____ $_____
_____ $_____
_____ $_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☑ No
☐ Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

_____ $_____
_____ $_____
_____ $_____

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☑ No
☐ Yes. Give specific information about them. .. $_____

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☑ No
☐ Yes. Give specific information about them. .. $_____

27. **Licenses, franchises, and other general intangibles**
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☑ No
☐ Yes. Give specific information about them. .. $_____

Money or property owed to you? **Current value of the portion you own?** Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

☐ No
☑ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ..... 2025 returns filed; federal and NC refunds delayed by review

Federal: $ 1120.00
State: $ 360.00
Local: $ 0.00

29. **Family support**
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☑ No
☐ Yes. Give specific information. .....

Alimony: $_____
Maintenance: $_____
Support: $_____
Divorce settlement: $_____
Property settlement: $_____

30. **Other amounts someone owes you**
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☑ No
☐ Yes. Give specific information. ..... $_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

31. **Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☑ No

☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:	Beneficiary:	Surrender or refund value:
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____

32. **Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☑ No

☐ Yes. Give specific information. .....

$_____

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☑ No

☐ Yes. Describe each claim. .....

$_____

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☑ No

☐ Yes. Describe each claim. .....

$_____

35. **Any financial assets you did not already list**

☑ No

☐ Yes. Give specific information. .....

$_____

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** ..... ➔ $3440.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. **Do you own or have any legal or equitable interest in any business-related property?**

☑ No. Go to Part 6.

☐ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

☐ No

☐ Yes. Describe .....

$_____

39. **Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

☐ Yes. Describe .....

$_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ❑ No
- ❑ Yes. Describe..... $_____

41. **Inventory**

- ❑ No
- ❑ Yes. Describe..... $_____

42. **Interests in partnerships or joint ventures**

- ❑ No
- ❑ Yes. Describe..... Name of entity: % of ownership:

_____ _____% $_____
_____ _____% $_____
_____ _____% $_____

43. **Customer lists, mailing lists, or other compilations**

- ❑ No
- ❑ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))**?**
  - ❑ No
  - ❑ Yes. Describe..... $_____

44. **Any business-related property you did not already list**

- ❑ No
- ❑ Yes. Give specific information .....

_____ $_____
_____ $_____
_____ $_____
_____ $_____
_____ $_____
_____ $_____

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** ..... ➔ $ 0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☑ No. Go to Part 7.
- ❑ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ❑ No
- ❑ Yes..... $_____

48. **Crops—either growing or harvested**

- ☐ No
- ☐ Yes. Give specific information. .....

$_____

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☐ No
- ☐ Yes.....

$_____

50. **Farm and fishing supplies, chemicals, and feed**

- ☐ No
- ☐ Yes.....

$_____

51. **Any farm- and commercial fishing-related property you did not already list**

- ☐ No
- ☐ Yes. Give specific information. .....

$_____

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** ..... ➔ $ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**
Examples: Season tickets, country club membership

- ☑ No
- ☐ Yes. Give specific information. .....

$_____
$_____
$_____

54. **Add the dollar value of all of your entries from Part 7. Write that number here** ..... ➔ $ 0.00

Part 8: List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2**..... ➔ $ 0.00

56. **Part 2: Total vehicles, line 5** $ 4200.00

57. **Part 3: Total personal and household items, line 15** $ 4350.00

58. **Part 4: Total financial assets, line 36** $ 3440.00

59. **Part 5: Total business-related property, line 45** $ 0.00

60. **Part 6: Total farm- and fishing-related property, line 52** $ 0.00

61. **Part 7: Total other property not listed, line 54** + $ 0.00

62. **Total personal property.** Add lines 56 through 61..... $ 11990.00 Copy personal property total ➔ + $ 11990.00

63. **Total of all property on Schedule A/B.** Add line 55 + line 62..... $ 11990.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*
   - ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
   - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on *Schedule A/B* that lists this property	**Current value of the portion you own** Copy the value from *Schedule A/B*	**Amount of the exemption you claim** *Check only one box for each exemption.*	**Specific laws that allow exemption**
Brief description: 2013 Honda Civic Line from *Schedule A/B:* 3.1	$ 4200.00	☑ $ 3500.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(3)
Brief description: 2013 Honda Civic Line from *Schedule A/B:* 3.1	$ 4200.00	☑ $ 700.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: Household goods Line from *Schedule A/B:* 6	$ 2800.00	☐ $ _____ ☑ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)

3. **Are you claiming a homestead exemption of more than $214,000?**
   (Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)
   - ☑ No
   - ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
     - ☐ No
     - ☐ Yes

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 2: Additional Page

Brief description of the property and line on *Schedule A/B* that lists this property	Current value of the portion you own Copy the value from *Schedule A/B*	Amount of the exemption you claim *Check only one box for each exemption*	Specific laws that allow exemption
Brief description: Electronics Line from *Schedule A/B:* 7	$ 600.00	☐ $ _____ ☑ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Brief description: Clothing Line from *Schedule A/B:* 11	$ 700.00	☐ $ _____ ☑ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Brief description: Jewelry Line from *Schedule A/B:* 12	$ 250.00	☐ $ _____ ☑ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(4)
Brief description: Cash on hand Line from *Schedule A/B:* 16	$ 60.00	☑ $ 60.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: Harborview CU checking Line from *Schedule A/B:* 17.1	$ 640.00	☑ $ 640.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: Harborview CU savings Line from *Schedule A/B:* 17.3	$ 310.00	☑ $ 310.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: Security deposits Line from *Schedule A/B:* 22	$ 950.00	☑ $ 950.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: Tax refunds Line from *Schedule A/B:* 28	$ 1480.00	☑ $ 1480.00 ☐ 100% of fair market value, up to any applicable statutory limit	N.C. Gen. Stat. § 1C-1601(a)(2)
Brief description: _____ Line from *Schedule A/B:* _____	$ _____	☐ $ _____ ☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from *Schedule A/B:* _____	$ _____	☐ $ _____ ☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from *Schedule A/B:* _____	$ _____	☐ $ _____ ☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from *Schedule A/B:* _____	$ _____	☐ $ _____ ☐ 100% of fair market value, up to any applicable statutory limit	

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): _____ (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. **Do any creditors have claims secured by your property?**
   - ☑ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
   - ☐ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. **List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A **Amount of claim** Do not deduct the value of collateral.	Column B **Value of collateral that supports this claim**	Column C **Unsecured portion** If any
2.1	$_____	$_____	$_____

Creditor's Name _____

Number Street _____

City State ZIP Code _____

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Date debt was incurred _____ **Last 4 digits of account number** ___ ___ ___ ___

2.2	$_____	$_____	$_____

Creditor's Name _____

Number Street _____

City State ZIP Code _____

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Date debt was incurred _____ **Last 4 digits of account number** ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $ 0.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): _____ (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims 12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**
   - ☑ No. Go to Part 2.
   - ☐ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	_____ Priority Creditor's Name _____ Number Street _____ _____ City State ZIP Code **Who incurred the debt?** Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ **Check if this claim is for a community debt** **Is the claim subject to offset?** ☐ No ☐ Yes	**Last 4 digits of account number** ___ ___ ___ ___ **When was the debt incurred?** _____ **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed **Type of PRIORITY unsecured claim:** ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify _____	$_____	$_____	$_____
2.2	_____ Priority Creditor's Name _____ Number Street _____ _____ City State ZIP Code **Who incurred the debt?** Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ **Check if this claim is for a community debt** **Is the claim subject to offset?** ☐ No ☐ Yes	**Last 4 digits of account number** ___ ___ ___ ___ **When was the debt incurred?** _____ **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed **Type of PRIORITY unsecured claim:** ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify _____	$_____	$_____	$_____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☑ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1

Bluewater Rewards Visa
Nonpriority Creditor's Name

PO Box 30917
Number Street

Salt Lake City, UT 84130
City State ZIP Code

Last 4 digits of account number 2 2 1 4

When was the debt incurred? 05/2019

$ 4380.00

Who incurred the debt? Check one.

- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☑ No
- ☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☑ Other. Specify Credit card debt

4.2

Coastal Plains Anesthesia Group
Nonpriority Creditor's Name

PO Box 2289
Number Street

Greenville, NC 27836
City State ZIP Code

Last 4 digits of account number 3 3 6 8

When was the debt incurred? 03/2026

$ 2240.00

Who incurred the debt? Check one.

- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☑ No
- ☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☑ Other. Specify Medical debt

4.3

Meridian Bank & Trust Mastercard
Nonpriority Creditor's Name

PO Box 6492
Number Street

Sioux Falls, SD 57117
City State ZIP Code

Last 4 digits of account number 8 8 3 0

When was the debt incurred? 11/2021

$ 2915.00

Who incurred the debt? Check one.

- ☑ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☑ No
- ☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☑ Other. Specify Credit card debt

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

Pinnacle Card Services
Nonpriority Creditor's Name

PO Box 71083
Number Street

Charlotte, NC 28272
City State ZIP Code

Who incurred the debt? Check one.

- [x] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [x] No
- [ ] Yes

Last 4 digits of account number 5 5 0 7

When was the debt incurred? 02/2023

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [x] Other. Specify Credit card debt

$ 1640.00

4.5

Sandhill Installment Lending
Nonpriority Creditor's Name

88 Market Square Blvd
Number Street

Fayetteville, NC 28301
City State ZIP Code

Who incurred the debt? Check one.

- [x] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [x] No
- [ ] Yes

Last 4 digits of account number 6 0 1 9

When was the debt incurred? 07/2025

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [x] Other. Specify Personal loan

$ 2480.00

4.6

Seabreeze Surgical Partners PLLC
Nonpriority Creditor's Name

1730 Tidewater Pkwy Ste 300
Number Street

Wilmington, NC 28401
City State ZIP Code

Who incurred the debt? Check one.

- [x] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [x] No
- [ ] Yes

Last 4 digits of account number 0 4 5 1

When was the debt incurred? 03/2026

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [x] Other. Specify Medical debt

$ 9860.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

Tidewater Emergency Physicians Billing
Nonpriority Creditor's Name

PO Box 15228
Number Street

Raleigh, NC 27610
City State ZIP Code

Who incurred the debt? Check one.

- [x] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [x] No
- [ ] Yes

Last 4 digits of account number 7 7 1 2

When was the debt incurred? 02/2026

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [x] Other. Specify Medical debt

$1975.00

_____
Nonpriority Creditor's Name

_____
Number Street

_____
City State ZIP Code

Who incurred the debt? Check one.

- [ ] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [ ] No
- [ ] Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [ ] Other. Specify_____

$_____

_____
Nonpriority Creditor's Name

_____
Number Street

_____
City State ZIP Code

Who incurred the debt? Check one.

- [ ] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [ ] No
- [ ] Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Type of **NONPRIORITY** unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [ ] Other. Specify_____

$_____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a. **Domestic support obligations**	6a.	$_____
	6b. **Taxes and certain other debts you owe the government**	6b.	$_____
	6c. **Claims for death or personal injury while you were intoxicated**	6c.	$_____
	6d. **Other.** Add all other priority unsecured claims. Write that amount here.	6d.	+ $_____
	6e. **Total.** Add lines 6a through 6d.	6e.	$ 0.00

			Total claim
Total claims from Part 2	6f. **Student loans**	6f.	$_____
	6g. **Obligations arising out of a separation agreement or divorce that you did not report as priority claims**	6g.	$_____
	6h. **Debts to pension or profit-sharing plans, and other similar debts**	6h.	$_____
	6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ $ 25490.00
	6j. **Total.** Add lines 6f through 6i.	6j.	$ 25490.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse If filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. **Do you have any executory contracts or unexpired leases?**
   - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
   - ☑ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. **List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Larkspur Court Apartments LLC Name 400 Larkspur Ct Number Street Wilmington, NC 28403 City State ZIP Code	Apartment lease, 12 months, $1,150 a month
2.2	Name Number Street City State ZIP Code	
2.3	Name Number Street City State ZIP Code	
2.4	Name Number Street City State ZIP Code	
2.5	Name Number Street City State ZIP Code	

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): _____ (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
   - ☑ No
   - ☐ Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
   - ☑ No. Go to line 3.
   - ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
     - ☐ No
     - ☐ Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

     _____
     Name of your spouse, former spouse, or legal equivalent

     _____
     Number Street

     _____
     City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D, Schedule E/F, or Schedule G* to fill out Column 2.**

Column 1: **Your codebtor**	*Column 2:* **The creditor to whom you owe the debt** Check all schedules that apply:
3.1 _____ Name _____ Number Street _____ City State ZIP Code	☐ Schedule D, line _____ ☐ Schedule E/F, line _____ ☐ Schedule G, line _____
3.2 _____ Name _____ Number Street _____ City State ZIP Code	☐ Schedule D, line _____ ☐ Schedule E/F, line _____ ☐ Schedule G, line _____
3.3 _____ Name _____ Number Street _____ City State ZIP Code	☐ Schedule D, line _____ ☐ Schedule E/F, line _____ ☐ Schedule G, line _____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

Check if this is:

- ❑ An amended filing
- ❑ A supplement showing postpetition chapter 13 income as of the following date: ____ MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

   If you have more than one job, attach a separate page with information about additional employers.

   Include part-time, seasonal, or self-employed work.

   Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	☑ Employed ❑ Not employed	❑ Employed ❑ Not employed
Occupation	Medical office scheduler	
Employer's name	Shoreline Family Practice PA	
Employer's address	2210 Gull Point Rd Number Street Wilmington, NC, 28405 City State ZIP Code	 Number Street City State ZIP Code
How long employed there?	6 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	$ 3450.00	$
3. **Estimate and list monthly overtime pay.**	3.	+ $ 0.00	+ $
4. **Calculate gross income.** Add line 2 + line 3.	4.	$ 3450.00	$

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here →	4.	$ 3450.00	$	
5. **List all payroll deductions:**				
5a. **Tax, Medicare, and Social Security deductions**	5a.	$ 520.00	$	
5b. **Mandatory contributions for retirement plans**	5b.	$ 0.00	$	
5c. **Voluntary contributions for retirement plans**	5c.	$ 0.00	$	
5d. **Required repayments of retirement fund loans**	5d.	$ 0.00	$	
5e. **Insurance**	5e.	$ 260.00	$	
5f. **Domestic support obligations**	5f.	$ 0.00	$	
5g. **Union dues**	5g.	$ 0.00	$	
5h. **Other deductions.** Specify: _____	5h.	+ $ 0.00	+ $	
6. **Add the payroll deductions**. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	$ 780.00	$	
7. **Calculate total monthly take-home pay.** Subtract line 6 from line 4.	7.	$ 2670.00	$	
8. **List all other income regularly received:**				
8a. **Net income from rental property and from operating a business, profession, or farm** Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	$ 0.00	$	
8b. **Interest and dividends**	8b.	$ 0.00	$	
8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive** Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	$ 0.00	$	
8d. **Unemployment compensation**	8d.	$ 0.00	$	
8e. **Social Security**	8e.	$ 0.00	$	
8f. **Other government assistance that you regularly receive** Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	$ 0.00	$	
8g. **Pension or retirement income**	8g.	$ 0.00	$	
8h. **Other monthly income.** Specify: _____	8h.	+ $ 0.00	+ $	
9. **Add all other income**. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	$ 0.00	$	
10. **Calculate monthly income.** Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	$ 2670.00	+ $	= $ 2670.00

11. **State all other regular contributions to the expenses that you list in *Schedule J*.**
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.
Specify: _____ 11. + $ 0.00

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income.
Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information,* if it applies 12. $ 2670.00
Combined monthly income

13. **Do you expect an increase or decrease within the year after you file this form?**
☑ No.
☐ Yes. Explain:

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date: _____ MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**

   - ☑ No. Go to line 2.
   - ☐ Yes. **Does Debtor 2 live in a separate household?**
     - ☐ No
     - ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. **Do you have dependents?**

   Do not list Debtor 1 and Debtor 2.

   Do not state the dependents' names.

   - ☐ No
   - ☑ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Son	9	☐ No ☑ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?**

   - ☑ No
   - ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4.	**The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4. $ 1150.00
	If not included in line 4:	
4a.	Real estate taxes	4a. $ 0.00
4b.	Property, homeowner's, or renter's insurance	4b. $ 0.00
4c.	Home maintenance, repair, and upkeep expenses	4c. $ 0.00
4d.	Homeowner's association or condominium dues	4d. $ 0.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

		Your expenses
5. **Additional mortgage payments for your residence**, such as home equity loans	5.	$ 0.00
6. **Utilities:**		
6a. Electricity, heat, natural gas	6a.	$ 140.00
6b. Water, sewer, garbage collection	6b.	$ 45.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$ 95.00
6d. Other. Specify: _____	6d.	$ 0.00
7. **Food and housekeeping supplies**	7.	$ 520.00
8. **Childcare and children's education costs**	8.	$ 180.00
9. **Clothing, laundry, and dry cleaning**	9.	$ 60.00
10. **Personal care products and services**	10.	$ 30.00
11. **Medical and dental expenses**	11.	$ 80.00
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$ 160.00
13. **Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$ 25.00
14. **Charitable contributions and religious donations**	14.	$ 0.00
15. **Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	$ 0.00
15b. Health insurance	15b.	$ 0.00
15c. Vehicle insurance	15c.	$ 85.00
15d. Other insurance. Specify:_____	15d.	$ 0.00
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	$ 0.00
17. **Installment or lease payments:**		
17a. Car payments for Vehicle 1	17a.	$ 0.00
17b. Car payments for Vehicle 2	17b.	$ 0.00
17c. Other. Specify:_____	17c.	$ 0.00
17d. Other. Specify:_____	17d.	$ 0.00
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$ 0.00
19. **Other payments you make to support others who do not live with you.** Specify:_____	19.	$ 0.00
20. **Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I*: *Your Income*.**		
20a. Mortgages on other property	20a.	$ 0.00
20b. Real estate taxes	20b.	$ 0.00
20c. Property, homeowner's, or renter's insurance	20c.	$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d.	$ 0.00
20e. Homeowner's association or condominium dues	20e.	$ 0.00

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

21. **Other**. Specify: _____ 21. +$ 0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a.	$ 2570.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	$ 0.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	$ 2570.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I.*	23a.	$ 2670.00
23b. Copy your monthly expenses from line 22c above.	23b.	− $ 2570.00
23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income*.	23c.	$ 100.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☑ No.
☐ Yes. Explain here:

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway
First Name | Middle Name | Last Name

Debtor 2 (Spouse, if filing): _____
First Name | Middle Name | Last Name

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☑ No

☐ Yes. Name of person_____. Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

✘ _____
Signature of Debtor 1

Date _____
MM / DD / YYYY

✘ _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway
First Name | Middle Name | Last Name

Debtor 2 (Spouse, if filing): _____
First Name | Middle Name | Last Name

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

☐ Married
☑ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

☑ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
_____ Number Street _____ _____ City State ZIP Code	From _____ To _____	☐ Same as Debtor 1 _____ Number Street _____ _____ City State ZIP Code	☐ Same as Debtor 1 From _____ To _____
_____ Number Street _____ _____ City State ZIP Code	From _____ To _____	☐ Same as Debtor 1 _____ Number Street _____ _____ City State ZIP Code	☐ Same as Debtor 1 From _____ To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☑ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

4. **Did you have any income from employment or from operating a business during this year or the two previous calendar years?**
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No
☑ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	**Gross income** (before deductions and exclusions)	**Sources of income** Check all that apply.	**Gross income** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☑ Wages, commissions, bonuses, tips ☐ Operating a business	$ 34500.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$
For last calendar year: (January 1 to December 31, 2025 YYYY)	☑ Wages, commissions, bonuses, tips ☐ Operating a business	$ 40800.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$
For the calendar year before that: (January 1 to December 31, 2024 YYYY)	☑ Wages, commissions, bonuses, tips ☐ Operating a business	$ 39600.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$

5. **Did you receive any other income during this year or the two previous calendar years?**
Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☑ No
☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	**Gross income from each source** (before deductions and exclusions)	**Sources of income** Describe below.	**Gross income from each source** (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		$		$
		$		$
		$		$
For last calendar year: (January 1 to December 31, 2025 YYYY)		$		$
		$		$
		$		$
For the calendar year before that: (January 1 to December 31, 2024 YYYY)		$		$
		$		$
		$		$

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $8,575* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of $8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

☑ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $600 or more?

☑ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of $600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for…
Creditor's Name Number Street City State ZIP Code		$_____	$_____	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other _____
Creditor's Name Number Street City State ZIP Code		$_____	$_____	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other _____
Creditor's Name Number Street City State ZIP Code		$_____	$_____	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other _____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☑ No
☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
Include payments on debts guaranteed or cosigned by an insider.

☑ No
☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☑ No
☐ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title_____ _____ Case number _____		_____ Court Name _____ Number Street _____ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded
Case title_____ _____ Case number _____		_____ Court Name _____ Number Street _____ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

☑ No. Go to line 11.
☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code	**Explain what happened** ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	_____	$_____
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code	**Explain what happened** ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	_____	$_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☑ No
☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
_____ Creditor's Name _____ Number Street _____ _____ City State ZIP Code		_____	$_____

Last 4 digits of account number: XXXX–___ ___ ___ ___

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☑ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than $600 per person?

☑ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
_____ Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____		_____ _____	$_____ $_____

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
_____ Person to Whom You Gave the Gift _____ _____ Number Street _____ City State ZIP Code Person's relationship to you _____		_____ _____	$_____ $_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than $600 to any charity?

☑ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than $600	Describe what you contributed	Date you contributed	Value
_____ Charity's Name _____ _____ Number Street _____ City State ZIP Code		_____	$_____
		_____	$_____

Part 6: List Certain Losses

15. **Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

☑ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*	Date of your loss	Value of property lost
		_____	$_____

Part 7: List Certain Payments or Transfers

16. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No
☑ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Brightpath Credit Counseling Inc PO Box 4410 (Number Street) _____ Raleigh NC 27619 (City State ZIP Code) brightpath.example.com (Email or website address) _____ Person Who Made the Payment, if Not You	Credit counseling course fee	09/2026	$ 35.00
		_____	$_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
_____ Person Who Was Paid _____ Number Street _____ City State ZIP Code _____ Email or website address _____ Person Who Made the Payment, if Not You		_____	$_____
		_____	$_____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☑ No

☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
_____ Person Who Was Paid _____ Number Street _____ City State ZIP Code		_____	$_____
		_____	$_____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

☑ No

☐ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
_____ Person Who Received Transfer _____ Number Street _____ City State ZIP Code Person's relationship to you _____			_____
_____ Person Who Received Transfer _____ Number Street _____ City State ZIP Code Person's relationship to you _____			_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

☑ No
☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☑ **No**
☐ **Yes. Fill in the details.**

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX–___ ___ ___ ___	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other_____	_____	$_____
Name of Financial Institution Number Street City State ZIP Code	XXXX–___ ___ ___ ___	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other_____	_____	$_____

21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

☑ **No**
☐ **Yes. Fill in the details.**

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		☐ No ☐ Yes

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☑ No
- ☐ Yes. Fill in the details.

Name of Storage Facility Number Street City State ZIP Code	Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you still have it?
			☐ No ☐ Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☑ No
- ☐ Yes. Fill in the details.

Owner's Name Number Street City State ZIP Code	Where is the property? Number Street City State ZIP Code	Describe the property	Value
			$_____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ***Environmental law*** **means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.**
- ***Site*** **means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.**
- ***Hazardous material*** **means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.**

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☑ No
- ☐ Yes. Fill in the details.

Name of site Number Street City State ZIP Code	Governmental unit Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	Date of notice
			_____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

25. Have you notified any governmental unit of any release of hazardous material?

- ☑ No
- ☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site Number Street City State ZIP Code	Governmental unit Number Street City State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☑ No
- ☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title_____ Case number Court Name Number Street City State ZIP Code		☐ Pending ☐ On appeal ☐ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☑ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name Number Street City State ZIP Code		EIN: __ __ – __ __ __ __ __ __ __
	Name of accountant or bookkeeper	**Dates business existed**
		From _____ To _____

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name Number Street City State ZIP Code		EIN: __ __ – __ __ __ __ __ __ __
	Name of accountant or bookkeeper	**Dates business existed**
		From _____ To _____

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Business Name Number Street City State ZIP Code	**Describe the nature of the business**	**Employer Identification number** **Do not include Social Security number or ITIN.** **EIN:** ___ ___ – ___ ___ ___ ___ ___ ___ ___
	Name of accountant or bookkeeper	**Dates business existed** **From** _____ **To** _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☑ **No**
☐ **Yes. Fill in the details below.**

Name Number Street City State ZIP Code	**Date issued** MM / DD / YYYY

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

✘ _____
Signature of Debtor 1

Date _____

✘ _____
Signature of Debtor 2

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☑ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☑ No
☐ Yes. Name of person_____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

Debtor 1: Renee A Holloway (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): (First Name / Middle Name / Last Name)

United States Bankruptcy Court for the: Eastern District of North Carolina

Case number: (If known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☑ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A–2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A–1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.
   - ☑ **Not married.** Fill out Column A, lines 2-11.
   - ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
   - ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
     - ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
     - ☐ **Living separately or are legally separated**. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write $0 in the space.

	Column A **Debtor 1**	*Column B* **Debtor 2 or non-filing spouse**
2. **Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions).	$ 3450.00	$
3. **Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.	$ 0.00	$
4. **All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	$ 0.00	$

5. **Net income from operating a business, profession, or farm**

	Debtor 1	Debtor 2		Column A	Column B
Gross receipts (before all deductions)	$ 0.00	$			
Ordinary and necessary operating expenses	− $ 0.00	− $			
Net monthly income from a business, profession, or farm	$ 0.00	$	Copy here →	$ 0.00	$

6. **Net income from rental and other real property**

	Debtor 1	Debtor 2		Column A	Column B
Gross receipts (before all deductions)	$ 0.00	$			
Ordinary and necessary operating expenses	− $ 0.00	− $			
Net monthly income from rental or other real property	$ 0.00	$	Copy here →	$ 0.00	$

7. **Interest, dividends, and royalties**	$ 0.00	$

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. **Unemployment compensation** Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ..... ➔	$ 0.00	$
For you	$	
For your spouse	$	
9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	$ 0.00	$
10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		
_____	$ 0.00	$
_____	$ 0.00	$
Total amounts from separate pages, if any.	+ $ 0.00	+ $
11. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	$ 3450.00 +	$ = $ 3450.00 **Total current monthly income**

Part 2: Determine Whether the Means Test Applies to You

12. **Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. ..... **Copy line 11 here** ➔ $ 3450.00

Multiply by 12 (the number of months in a year). x 12

12b. The result is your annual income for this part of the form. 12b. $ 41400.00

13. **Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live. NC

Fill in the number of people in your household. 2

Fill in the median family income for your state and size of household. ..... 13. $ 84384.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. **How do the lines compare?**

14a. ☑ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A–2.

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Debtor 1 Renee A Holloway
First Name Middle Name Last Name

Case number (*if known*)_____

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

✘ _____
Signature of Debtor 1

Date _____
MM / DD / YYYY

✘ _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A–2.

If you checked line 14b, fill out Form 122A–2 and file it with this form.

CHAPTER 7 BANKRUPTCY FILING INFORMATION

PACKET PREPARED FOR:
Debtor: Renee A Holloway
District: Eastern District of North Carolina

These information pages are not court forms. Remove these pages from the packet before you file the forms.

YOUR COURT

U.S. Bankruptcy Court, Eastern District of North Carolina

Each bankruptcy court can have its own local rules and local forms, and its own way of taking the creditor mailing list and the other items listed below. Check your court's website before you file.

- Court website:
https://www.nceb.uscourts.gov

- Information on filing without a lawyer:
https://www.nceb.uscourts.gov/filing-without-attorney

BANKRUPTCY FORMS NOT INCLUDED IN THIS PACKET

The forms listed below are part of a standard Chapter 7 filing packet, but were not required for this filing based on the Debtor's stated circumstances. This list is provided so neither the filer nor a reviewing clerk mistakes an intentional omission for a missing document.

The list of common Chapter 7 Bankruptcy forms NOT included in this Debtor's filing:

- Form 101A: Initial Statement About an Eviction Judgment Against You
- Form 101B: Statement About Payment of an Eviction Judgment Against You
- Form 103A: Application for Individuals to Pay the Filing Fee in Installments
- Form 103B: Application to Have the Chapter 7 Filing Fee Waived
- Form 106J2: Expenses for Separate Household of Debtor 2
- Form 108: Statement of Intention for Individuals Filing Under Chapter 7
- Form 122A-1Supp: Statement of Exemption from Presumption of Abuse
- Form 122A-2: Chapter 7 Means Test Calculation
- Form 427, 2400A/B & C: Cover Sheet, Reaffirmation Agreement & Motion for Court Approval, and Order on Reaffirmation Agreement

OTHER REQUIRED ITEMS

- YOUR CREDIT-COUNSELING CERTIFICATE. Attach a copy of it, and any payment plan you made with the agency, to your petition (Form 101, line 15).

- PROOF OF THE PAY RECEIVED FROM ANY EMPLOYER IN THE 60 DAYS BEFORE FILING. The law says

to file pay stubs or other payment documentation unless the court orders otherwise, and many courts want them given to the Trustee instead. Check your court's website (11 U.S.C. 521(a)(1)(B)(iv)).

- YOUR MOST RECENT FEDERAL INCOME TAX RETURN, OR A TRANSCRIPT OF IT. Give it to the Trustee no later than 7 days before the date first set for the meeting of creditors. Do not file it with the court (11 U.S.C. 521(e)(2)(A)).

- YOUR DEBTOR-EDUCATION COURSE CERTIFICATE. After you file, take a personal financial management course from an approved provider. The certificate must be filed within 60 days after the first date set for the meeting of creditors. Some providers file it for you, so ask yours. If it is not filed, your case can be closed without a discharge (Fed. R. Bankr. P. 1007(b)(7), (c)).

- FORM 121, STATEMENT ABOUT YOUR SOCIAL SECURITY NUMBERS. It comes after your creditor mailing list and its verification. **Do not file it as part of the public case file.** Submit it separately along with your petition, following your court's local procedures (Fed. R. Bankr. P. 1007(f)).

- LOCAL FORMS IN THIS PACKET. Your court requires the items below; this packet includes the court's form for each, in the place noted for each one. They were filled in from the answers you gave in this questionnaire, but the questionnaire does not ask any extra questions for local court forms. Read each one carefully, correct anything that is wrong, complete anything left blank, then sign and date it.

Certification of Mailing Matrix Required by E.D.N.C. LBR 1007-2.
Filled in from your answers; it comes right after your creditor mailing list. Review it, then sign and date it.

Schedule C-1 - Property Claimed as Exempt.
Partly filled in; it comes right after Form 121. It asks for information this questionnaire does not collect, so complete by hand each section that applies to you before you sign and date it.

CREDITOR MAILING LIST

Your creditor mailing list (often called the creditor matrix) is on the page right after these information pages. It lists everyone on your Schedules D, E/F, G and H, in alphabetical order, in the plain one-column format that most courts accept. File it with your petition. Some courts want the list another way, such as a computer file or typed into the court's own online program; check your court's website. You can download the list as a computer file (.txt) from the screen where you downloaded this packet.

These information pages are generated automatically by Standard Legal from the questionnaire answers you provided. These are instructions, steps, and collected facts, not legal advice. See standardlegal.com/Bankruptcy for more information.

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

BLUEWATER REWARDS VISA
PO BOX 30917
SALT LAKE CITY UT 84130

COASTAL PLAINS ANESTHESIA GROUP
PO BOX 2289
GREENVILLE NC 27836

LARKSPUR COURT APARTMENTS LLC
400 LARKSPUR CT
WILMINGTON NC 28403

MERIDIAN BANK AND TRUST MASTERCARD
PO BOX 6492
SIOUX FALLS SD 57117

PINNACLE CARD SERVICES
PO BOX 71083
CHARLOTTE NC 28272

SANDHILL INSTALLMENT LENDING
88 MARKET SQUARE BLVD
FAYETTEVILLE NC 28301

SEABREEZE SURGICAL PARTNERS PLLC
1730 TIDEWATER PKWY STE 300
WILMINGTON NC 28401

TIDEWATER EMERGENCY PHYSICIANS BILLING
PO BOX 15228
RALEIGH NC 27610

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NORTH CAROLINA
WILMINGTON Division

IN RE: Renee A Holloway

CASE NO.:

Debtor(s)

CERTIFICATION OF MAILING MATRIX
REQUIRED BY E.D.N.C. LBR 1007-2

I hereby certify under penalty of perjury that the attached list of creditors which has been prepared in the format required by the clerk is true and accurate to the best of my knowledge and includes all creditors scheduled in the petition.

Dated:

_____

Debtor or Attorney for Debtor

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of North Carolina

Case number (*If known*):

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Tell the Court About Yourself and Your spouse if Your Spouse is Filing With You

	For Debtor 1:	**For Debtor 2 (Only If Spouse Is Filing):**
1. Your name	Renee First name	First name
	A Middle name	Middle name
	Holloway Last name	Last name

Part 2: Tell the Court About all of Your Social Security or Federal Individual Taxpayer Identification Numbers

2. All Social Security Numbers you have used	987-65-4320	
	❑ You do not have a Social Security number.	❑ You do not have a Social Security number.
3. All federal Individual Taxpayer Identification Numbers (ITIN) you have used		
	☑ You do not have an ITIN.	❑ You do not have an ITIN.

Part 3: Sign Below

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.	Under penalty of perjury, I declare that the information I have provided in this form is true and correct.
✘ _____ Signature of Debtor 1	✘ _____ Signature of Debtor 2
Date _____ MM / DD / YYYY	Date _____ MM / DD / YYYY

SAMPLE - FICTIONAL EXAMPLE - NOT FOR FILING

Rev. 9/2025

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NORTH CAROLINA
WILMINGTON DIVISION

IN THE MATTER OF:

CASE NUMBER:

Renee A Holloway

Debtor(s)

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, Renee A Holloway, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: **(Attach additional sheets if necessary)**.

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed $35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed $60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)

Debtor's Age: _____
Name of former co-owner: _____

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): $ 0 **.00**

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed $3,500).

Model, Year Style of Auto	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2013 Honda Civic	4,200.00	D1			4,200.00	3,500.00

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): $ 3,500 **.00**

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is notto exceed $5,000 plus $1,000 for each dependent of the debtor, not to exceed $4,000 total for dependents). The number of dependents for exemption purposes is 1.

Description of Property	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Clothing & personal	700.00	D1			700.00	700.00
Kitchen appliances						
Stove						
Refrigerator						
Freezer						
Washing machine						
Dryer						
China						
Silver						
Jewelry	250.00	D1			250.00	250.00
Living room furniture						
Den furniture						
Bedroom furniture						
Dining room furniture						
Television						
()Stereo ()VCR/DVD						
()Radio ()Video Camera						
Musical Instruments						
()Piano ()Organ						
Air conditioner						
Paintings/Art						
Lawn mower						
Yard tools						
Crops						
Recreational Equipment						
()Computer						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4) : $ 4,350 **.00**

Other personal or household goods claimed under NCGS 1C-1601(a)(4), from Schedule A/B (included in the total above):

Household goods (A/B 6)	2,800.00	D1	2,800.00	2,800.00
Electronics (A/B 7)	600.00	D1	600.00	600.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed $2,000 in value).

Description	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS-1C-1601(a)(5): $ 0 **.00**

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5)

Description	Insured	Last Four Digits of Policy Number	Beneficiary (if child, initials only)	Cash Value

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description	Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

8. NCGS 1C-1601(a)(2) ANY PROPERTY [Debtor's aggregate interest in any property is not to exceed $5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)].

Description of Property and Address	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
2013 Honda Civic	4,200.00	D1			4,200.00	700.00
Cash on hand	60.00	D1			60.00	60.00
More: see Schedule C						3,380.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2) : $ 4,140 **.00**

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account	Location of Account	Last Four Digits of Account Number

10. NCGS 1C-1601.5 FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6). The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan	Last Four Digits of Account Number	Value	Initials of Child Beneficiary

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan	State Governmental Unit	Last Four Digits of Identifying Number

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support	Amount	Location of Funds

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property and Address	Market Value	Lien Holder	Amount of Lien	Net Value

VALUE CLAIMED AS EXEMPT: $ 0 .00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

a.	North Carolina Local Government Employees Retirement benefits NCGS 128-31	
b.	North Carolina Teachers and State Employees Retirement benefits NCGS 135-9	
c.	Firemen's Relief Fund pensions NCGS 58-86-90	
d.	Fraternal Benefit Society benefits NCGS 58-24-85	
e.	Benefits under the Supplemental Retirement Income Plan for teachers and state employees are exempt from levy, sale, and garnishment NCGS 135-95	
f.	Benefits under the Supplemental Retirement Income Plan for state law enforcement officers are exempt from levy, sale, and garnishment NCGS 143-166.30(g)	

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

a.	Aid to the Aged, Disabled and Families with Dependent Children NCGS 108A-36	
b.	Aid to the Blind NCGS 111-18	
c.	Yearly Allowance of Surviving Spouse NCGS 30-15	
d.	Workers Compensation benefits NCGS 97-21	
e.	Unemployment benefits, so long as not commingled and except for debts for necessities purchased while unemployed NCGS 96-17	
f.	Group insurance proceeds NCGS 58-58-165	
g.	Partnership property, except on a claim against the partnership NCGS 59-55	
h.	Wages of debtor necessary for support of family NCGS 1-362	
i.	Benefits under the Separate Insurance Benefits Plan for state and local law enforcement officers are exempt from levy, sale, and garnishment NCGS 143-166.60(h)	
j.	Vested benefits under the North Carolina Public Employee Deferred Compensation Plan are exempt from levy, sale, and garnishment NCGS 147-9.4	

16. FEDERAL PENSION FUND EXEMPTIONS

a.	Foreign Service Retirement and Disability Payments 22 U.S.C. § 4060	
b.	Civil Service Retirement benefits 5 U.S.C. § 8346	
c.	Railroad Retirement Act annuities and pensions 45 U.S.C. § 231m	
d.	Veterans benefits 38 U.S.C. § 5301	
e.	Special pension paid to winners of Congressional Medal of Honor 38 U.S.C. § 1562	
f.	Annuities payable for service in the General Accounting Office 31 U.S.C. 776	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

a.	Social Security benefits 42 U.S.C. § 407	
b.	Injury or death compensation payments from war risk hazards 42 U.S.C. § 1717	
c.	Wages owing a master or seamen, except for support of a spouse and/or minor children 46 U.S.C. § 11109	
d.	Longshoremen and Harbor Workers Compensation Act death and disability benefits 33 U.S.C. § 916	
e.	Crop insurance proceeds 7 U.S.C. § 1509	
f.	Public safety officers' death benefits 42 U.S.C. § 3796. See subsection (g)	
g.	Railroad unemployment insurance 45 U.S.C. § 352. See subsection (e)	
h.	Other and please specify	

18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market Value	Lien Holder	Amount of Lien	Net Value

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

19. The debtor's property is subject to the following claims:

a. Of the United States or its agencies as provided by federal law
b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds
c. Of a lien by a laborer for work done and performed for the person claiming the exemption. but only as to the specific property affected
d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected
e. For payment of obligations contracted for the purchase of specific real property affected.
f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods
g. For statutory liens, on the specific property affected, other than judicial liens
h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina
i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38
j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations)
k. Debts of a kind specified in 11 U.S.C. § 522(c)

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net Value

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL
TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, Renee A Holloway, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 6 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: _____

_____
Debtor