

CREDITOR LIST Law Offices of Peter Francis Geraci READ THESE INSTRUCTIONS AND INITIAL EACH ONE

- ___1. List ALL debts *whether you want to keep them or not!!!* Put a star next to number if "keeping" You must be current unless a 13.
- ___2. You can't keep credit cards unless with credit union secured w/other debts. List debts you dispute, debts you owe friends, etc.
- ___3. First list debts with collateral like mortgages, vehicles, credit unions, finance companies; ALL SECURED DEBTS FIRST!
- ___4. List any child support agency you owe, and tax debts. List credit cards, medical, payday loans, unsecured debts etc. last.
- ___5. Get the name of the creditor right! List the co-signer, collector or attorney in the space for Collection Agency
- ___6. If you don't know the CREDITOR ADDRESS, go on Google (free at library) and FIND IT.
- ___7. FILL IN ALL BLANKS & list the date originally opened & the date last used. Joint filers must specify Husb,wife, joint, community.
- ___8. **Failure to list any debt is fraudulent!!** If you have more than 15 creditors, make a copy of page 2 and re-number it.

1	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
2	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
3	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
4	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
5	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
6	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			
7	Creditor	Address	City	State	Zip
A D E F H	Date opened / /	Date last used / /	What for	Account #	BAL \$
<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral (house, vehicle, cr union Personal property account pension) or NONE	Collection agency Co-signer Collector or attorney name, address, acct #			

8	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
9	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
10	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
11	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
12	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
13	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
14	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			
15	Creditor		Address		City	State	Zip
	A D E F H	Date opened /	Date last used /	What for	Account #	BAL \$	
	<input type="checkbox"/> Husb-indiv <input type="checkbox"/> wife <input type="checkbox"/> Joint <input type="checkbox"/> Community	Describe collateral or NONE		Collection agency Co-signer Collector or attorney name, address, acct #			

I/We have 15 debts or less ___ more debts, see next page
 x _____ x _____ Date: ____/____/____