

EASY-QUESTIONNAIRE

SERVICE (Circle One)	Standard	Next Day
Bankruptcy	\$199	\$249
Divorce	\$199	\$249
Name Change	\$149	\$199
Trusts & Wills	\$149	\$199

THE SERVICE INCLUDES
<ul style="list-style-type: none"> Unlimited Free Updates Easy Filing Instructions Express 3 Day Service Toll Free Customer Support 100% Money Back Guarantee

HOW IT WORKS

1. Complete this Easy-Questionnaire by answering the questions that apply to your service.
2. Pay Agent for the service and they will Fax or Email the Easy-Questionnaire to our Data Center.
3. Then in 3 business days your documents arrive Priority Mail with Easy Filing Instructions.

NEED SOME HELP?	Speak with your Agent or call Customer Service at 800.895.1580
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1. Your Current Information	Bankruptcy	Divorce	Name Change	Trusts & Wills
Your Legal Name:	Spouses Name:			
Other Names used in the last 8 years	Other names used in the last 8 years			
Your Current Address	Spouse/Parent Current Address			
Last 4 digits of SS#:	Last 4 digits of SS#:			
County of Residency:	County of Residency:			
Email:	Email:			
Phone #: DOB:	Phone #: DOB:			
If you lived at your current address less than 3 years, provide previous addresses for the last 5 years in area below:				
(Bankruptcy & Divorce) Address 1:				
(Bankruptcy & Divorce) Address 2:				
(Bankruptcy) Marital Status: Single Never Married Married Divorced Widowed Marriage Annulled (circle one)				
(Name Change) - NEW LEGAL NAME:				
(Name Change) - Reason for name change:				

2. Income & Employment Info	Bankruptcy	Divorce	Name Change	
Employers Name:	Spouses/Parent Employer:			
Address:	Address:			
Length of Time With This Employer:	Length of Time With This Employer:			
Gross Monthly Income:	Gross Monthly Income:			
Deductions (Specify):	Deductions (Specify):			
Net Mo. Income:	Annual Income:	Net Mo. Income:	Annual Income:	

2.1 Additional Information For:				Name Change			
Your Employment History for the past 5 years. This would include Schools and Military Service.							
Employer, School, Branch	Address			From	To	Occupation	

3. Debt & Creditors		Bankruptcy	Divorce	Name Change			
List Debt, Creditors & Civil Judgments below. For Bankruptcy a Credit Report can be used to get Debt information							
Creditors Name		Address		Last 4 Digits Of Account#	Amount	Award To Divorce Only	
1:							
2:							
3:							
4:							
(BNK Only) Do you owe any Unsecured Priority Debt? ? Yes No (Circle One)							
Definition: Debt owed to Gov't Agencies such as Child Support, Taxes, Fines, Overpayment of Benefits, etc.							

4. Real Estate		Bankruptcy	Divorce			Trusts & Wills	
Location Of Real Estate Owned		Mortgage Company/Purchase Date		% Owned	Value	Loan Balance	
1:							
2:							
Who will be Awarded the Real Estate and Duties for Properties above? (For Divorce, Trusts & Wills Only)							
Location Of Real Estate		Who will be responsible for debt?		Who will be awarded the Property?			
1:							
2:							

5. Personal Property		Bankruptcy	Divorce			Trusts & Wills	
Please List all Personal Property owned below. (If Needed Attach Additional Sheet)							
Description Of Personal Property		Location Of Property		Amount/Value	Award To (Divorce Only)		
1:					Wife Husband (Circle One)		
2:					Wife Husband (Circle One)		
3:					Wife Husband (Circle One)		

6. Minor/Dependent Children		Bankruptcy	Divorce				
Please provide the following information for all Minor and/or Dependent Children							
Childs Name		DOB	Gender	Place of Birth		Social Security Number	
1:							
2:							
3:							

MY COMPLETE CASE DOCUMENT SERVICES

7. Marriage Information		Divorce		
Date of Marriage:		City/County/State Married In:		
Type of Ceremony: Religious or Civil (Circle One)		Date of your Separation from spouse:		
What is the Grounds For Divorce?				
What's the Wife's Maiden Name:		Wife to resume her Maiden name? YES NO (circle one)		
Should Spousal Support be paid? YES NO (circle one)		Is there a Protection been granted? YES NO (circle one)		

8. Monthly Expenses	Bankruptcy	Divorce		
Rent or home mortgage payment (include lot rented for mobile home)				\$
Are Real Estate Taxes & Insurance included? Yes No (Circle One) If no add amount here >				\$
Utilities: Electricity and heating fuel				\$
Utilities: Water and sewer				\$
Utilities: Telephone Cable and Internet				\$
Other: Home owners dues.				\$
Home maintenance (repairs and upkeep)				\$
Food, personal care items, laundry supplies.				\$
Clothing, Laundry and Dry Cleaning				\$
Child Care or Paid child education expense				\$
Medical and Dental Expenses				\$
Transportation (not including car payments)				\$
Recreation, clubs and entertainment, newspapers, magazines, etc.				\$
Charitable contributions				\$
Insurance: (not deducted from wages or included in home mortgage payments)				\$
Insurance: Auto				\$
Taxes (not deducted from wages or included in home mortgage payments) Include student loan payments.				\$
Installment payments: Auto				\$
Installment payments: Other				\$
Alimony, maintenance, and support paid to others				\$
Payments for support of additional dependents not living at your home				\$
Regular expenses from operation of business, profession, or farm (attach detailed statement)				\$

9. Witness Information				Trusts & Wills
Name of Witness 1:			SS#	
Address:				
Name of Witness 2:			SS#	
Address:				
Name of Witness 3:			SS#	
Address:				

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10. Additional Child Information For:		Divorce	
Child	Current Address, City, St, Zip	Type Of Custody	Shall Reside With
1: Child #1		Sole or Joint Legal Custody	Mother or Father
2: Child #2		Sole or Joint Legal Custody	Mother or Father
3: Child #3		Sole or Joint Legal Custody	Mother or Father
If the Children have not lived at their Current Address for the last 5 years, please list all other addresses for the child(ren) during the last five years.			
Address 1:			
Address 2:			
Should Courts order Child Support? Yes No (Circle One)		Who will pay child support? Father Mother (Circle One)	
What amount of child support should be paid monthly?			
Where should child support payments be sent to?			
Who will claim the children as Tax Exemption? Mother Father (Circle One)			
Which parent will provide the health insurance for the children? Mother Father (Circle One)			
What percent should the above obligor pay of uninsured medical expenses?			
Have you or your spouse participated in any other litigation concerning the custody of the children in this or any other state? If Yes, provide State, County and Court:			
Do you have any information regarding any other custody proceeding pending in any court? Yes No (Circle One) If Yes, provide info:			
Do you know of any other person who has physical custody or claims to have custody or visitation rights regarding the children of this marriage? Yes No (Circle One) If Yes, provide info:			
What kind of visitation schedule do you want? Example: Weekdays with mom, weekends with dad, or alternating weekends with dad or mom. One week end a month dad. Please enter how you want the visitations to work.			
Should both parents be required to maintain a Life Insurance Policy naming the other parent as the beneficiary to ensure the support of the minor children? Yes No (Circle One) What amount should be maintained? _____			

DISCLAIMER: My Complete Case is not a Law Firm. The Company, its Employees or Agents are not acting as your attorney or providing you with any legal advice. We offer Document Preparation Services that includes a review of your document and answers for accuracy based on the info you are providing in this questionnaire. You are exercising your right to represent yourself in all matters that you execute using our services. **PRIVACY POLICY:** We do not store any of your credit card information. All transactions are processed through a third party secure gateway, and the information provided is only used for making the current transaction. No financial information is ever stored on our servers. All of the information provided for the completion of your documents will be guarded according to the highest standards in effect at that time. Your information is not provided for any commercial or other uses. The information you provide is only used for the administration of the completion of your documents.

*Signature Required: _____ Date: _____

AUTHORIZED AGENT INFO	AGENT NAME	EMAIL
	PHONE	SIGNATURE