Filing a Bankruptcy Through Legal Aid **Society of Mid New York**

The Legal Aid Society of Mid New York, Inc., is a not-for-profit law office, providing free counsel, advice, and legal representation in civil matters. The Consumer Bankruptcy Law Project aims to increase bankruptcy representation to low-income residents of Herkimer, Madison, and Oneida counties in CNY. Most individuals who seek help face significant debt that is often the result of loss of employment, costly medical expenses, or the actions of an abusive ex-spouse. Legal Aid Society of Mid New York prepares schedules for these individuals in order to recruit pro bono attorneys who will represent the clients in bankruptcy court.

COVID-19 Impact on Bankruptcy:

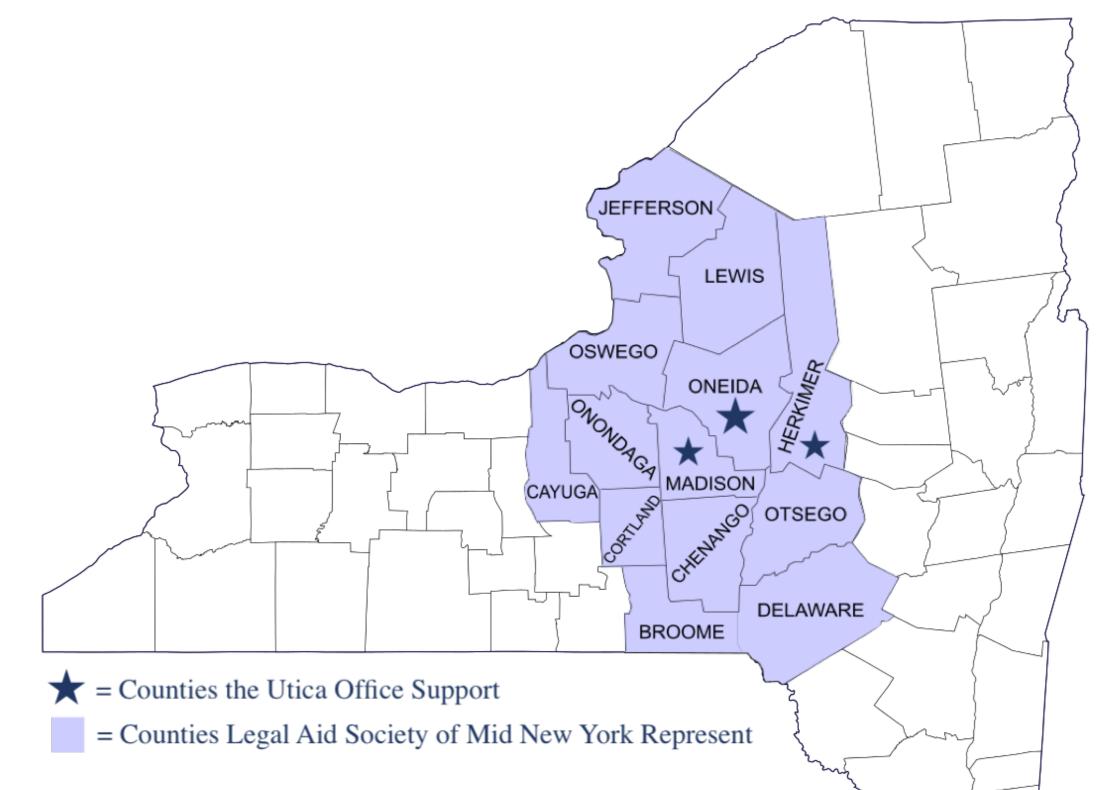
Region Served:

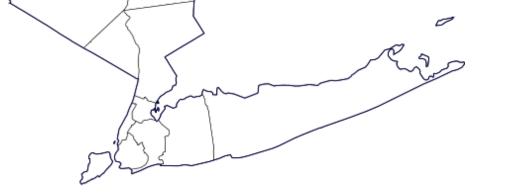
Clients have received increased benefits and relief in many ways due to their unique circumstances relating to COVID-19. Increased benefits for individuals typically include stimulus checks and reduced expenses and dues.

The Utica regional office for Legal Aid represents individuals from Herkimer, Madison, and Oneida counties. Within the larger populated counties, 30.4% of Utica's population falls below the federal poverty line. In Rome, 19.4% fall below, and in New Hartford, only 6.5% fall below the federal poverty line.

Process:

- Legal Aid provides the client with a questionnaire. The client then provides Legal Aid with material and information regarding their reasons for filing bankruptcy.
- Legal Aid analyzes the material provided, outlining property, expenses, income, and debts.
- The Legal Aid paralegal completes schedules A, B, I, J, E and F with the materials and information provided from the given client.
- The Legal Aid attorney meets with the client to go over material of the schedules.
- All schedules and material are handed over to the pro bono attorney. Work completed by Legal Aid will not only help the client, but will significantly help the pro bono attorney, as all the paperwork for the case is completed.





Schedules Completed:

Debtor 1				
	Phat Name	Ministe Name	Last Narro	
Debtor 2				
Spouse, Ffling)	First Name	ididelle Name	Lest Name	
United States B	lankruptcy Court for	rithe: District	of	

Official Form 106A/B

Schedule A/B: Propert

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 nsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pa

Check if this is an amended filing

escribe 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 pr No. Go to Part 2. Yes. Where is the property What is the property? Check all that a

Street address, if av	allable, or other description State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not leduct secured claims or exemptions. Put the amount of any secured daims on Steducie D Creditors Who Have Claims Secured by Property Current value of the entire property? Exemption you own? \$ \$ Describe the nature of your ownership Interest (such as fee simple, tenancy by		
		Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.	
County		Debtor 1 only Debtor 2 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 it property identification number:	Check If this is co (see instructions) tem, such as local	mmunity property	
a own or have more	than one, list here:				
		What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cle the amount of any secure Creditors Who Have Clear	d cleams on Schedule D.	
	than one, list here:	What is the property? Check all that apply.	the amount of any secure	d claims on Schedule D. os Secured by Property	
		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule D. ns Secured by Property. Current value of the	
		What is the property? Check all that apply. Single-family home Ouples or multi-unit building Condominium or cooperative Manufactured or mobile home Land investment property Timeshare Other	the amount of any secure Creditors Who Have Clain Current value of the	t dams on Schedule D: os Socured by Property. Current value of the portion you own? \$\$ f your ownership simple, tenancy by	
Street address, if ava	illable, or other description	What is the property? Check all that apply. Single-family home Ouples 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.	the amount of any secure Creditors Who Have Class Current value of the entire property? S Describe the nature of interest (such as See	t dams on Schedule D: os Socured by Property Current value of the portion you own? \$	
Street address, if ava	illable, or other description	What is the property? Check all that apply. Single-family home Ouples or multi-unit building Condominium or cooperative Manufactured or mobile home Land investment property Timeshare Other	the amount of any secure Creditors Who Have Class Current value of the entire property? S Describe the nature of interest (such as See	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$	

Debter 4			
Debtor 1 First Name	Middle Name	Last Name	
Oebtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the	District of		
Case number			Check if this is:
(If known)			An amended filing
			A supplement showing postpetition chapter 1 income as of the following date:
Official Form 106I	_		MM / DD / YYYY
Schedule I: You	ur Income		12/15
Part 1: Describe Employn 1. Fill in your employment	nent		
information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed	Employed Not employed
Include part-time, seasonal, or self-employed work.			
	Occupation		
Occupation may include student or homemaker, if it applies.			
	Employer's name		······
	Employer's name Employer's address		<u> </u>
		Number Street	Number Street
		Number Street	Number Street
		Number Street	
		City State ZIP Co	
	Employer's address How long employed there	City State ZIP Co	
Part 2: Give Details Abour Estimate monthly income as of spouse unless you are separated	Employer's address How long employed there Monthly Income the date you file this form ave more than one employer	City State ZIP Co	

Estimate and list monthly overtime pa Calculate gross income. Add line 2 + lin

Debto	or 1			eck if this is:		
Debto	First Name	Middle Name Last Neme				
	se, if filing) First Name	Middle Name Last Name		An amended f	-	petition chapter
Uniter	d States Bankruptcy Court for the:	District of		expenses as o		
Case (If kno	number			MM / DD / YYYY	/	
(11416						
Offic	cial Form 106J					
Sc	hedule J: You	ur Expenses				12/1
inform		ossible. If two married people are fill ad, attach another sheet to this form				
Part 1	Describe Your Hou	sehold				
1. Is th	is a joint case?					
	No. Go to line 2. Yes. Does Debtor 2 live in a s	eparate household?				
	 No Yes. Debtor 2 must file 	e Official Form 106J-2, Expenses for S	Separate Household of De	btor 2.		
2. Do y	you have dependents?	🖵 No	Dependent's relationship	to	Dependent's	Does dependent
Do n Debt	tot list Debtor 1 and tor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2		age	with you?
	ot state the dependents'					No Yes
Harris	58.					No No
						Yes
						No No
						Ves I No
						No No
						C Yes
expe	our expenses include enses of people other than self and your dependents?	No Yes				
Part 2:	Estimate Your Ongoir	ng Monthly Expenses				
Estimat expens	te your expenses as of your les as of a date after the bank	bankruptcy fillng date unless you a kruptcy is filed. If this is a suppleme				
applica	ble date.					
		-cash government assistance if you it on Schedule I: Your Income (Official)			Your expe	1505
Include	ssistance and nave included			and	and the state of the	No. of the second s
Include such as 4. The		xpenses for your residence. Include	first mortgage payments	4.	\$	
Include such as 4. The any	rental or home ownership ex	xpenses for your residence. Include	first mortgage payments		\$	
Include such as 4. The any	rental or home ownership ex rent for the ground or lot. ot Included In line 4: Real estate taxes		first mortgage payments		\$ \$	
4. The any If no 4a. 4b.	rental or home ownership ex rent for the ground or lot. ot included in line 4:	nter's Insurance	first morlgage payments	4.	\$\$\$\$	

Fill in this in	formation to ident	ify your case:			
Debtor 1	First Name	Middle Name	Lest Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for th	e: District	of		
Case number (If known)					
Official F	orm 106E/	F_			
Schedu	le E/F: C	reditors Wh	o Have Un	secured Claims	
				ORITY claims and Part 2 for created of the second s	

st the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule
B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any
aditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is
eded, 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
y additional pages, write your name and case number (if known).

Check if this is an

2.					
	nonpriority amounts. As much as possible, list the	a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's n Part 1. If more than one creditor holds a particular claim	at claim here an ame. If you have	nd show both e more than tw	priority and we priority
	(For an explanation of each type of claim, see the i	instructions for this form in the instruction booklet.)	Total claim	Priority amount	Nonprior
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
	Number Street	When was the debt incurred?			
	·	As of the date you file, the claim is: Check all that apply	1.		
	City State ZIP Code	Contingent Unliquidated			
	Who incurred the debt? Check one.	Cisputed			
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	 Domestic support obligations Taxes and certain other debts you owe the government 			
	Check if this claim is for a community debt	Claims for death or personal injury while you were			
	Is the claim subject to offset?	Intoxicated Other. Specify			
	Q Yes				
2.2	Priority Créditor's Name	Last 4 digits of account number	\$	\$	\$\$
	Number Street	when was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply	ι.		
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	At least one of the debtors and another Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			

