



P.O. Box 6688, Ocean Isle Beach, NC 28469
Phone (Toll Free) 1-844-289-2701 Fax 919-741-5869
Hearing impaired toll-free relay service dial 711

Information Relevant to the Credit Counseling Session - Disclosures

This session is required only if the consumer is planning on seeking a certification in North Carolina or Alabama pursuant to and in compliance with Section 109(h) of the US Bankruptcy code.

Certificate of Completion

You must complete the course in its entirety to receive a certificate of completion. Once you have completed the course, the system (or Butterfly representative) will confirm that you are complete. A certificate of completion will be generated with the time and date of completion and be sent to you. If you provided an email address for your attorney or an attorney code the certificate will also be sent to your attorney and be available through our system if your attorney has a code.

Timing

A Credit Counseling session is needed within 180 days of filing for Bankruptcy. Your certificate will be time stamped for the time and date you have completed the credit counseling session by Internet or phone. If you email a submission form your session will be complete at the time and date that the results are emailed to you.

Privacy Policy

Information collected by Butterfly Financial Education, Inc. is treated as confidential. No personally identifiable information will be released to any outside person or to any company unless required by law or expressly authorized by you or your attorney. Butterfly will never share information with any creditor, collection agent, or credit reporting agency. Butterfly reserves the right to collect non identifiable statistical information. Butterfly will not sell, rent, loan, lease or trade any information obtained from a consumer or their attorney. Butterfly may share information regarding your account with the Bankruptcy Administrators and your appointed attorney upon request.

Credit Reporting Agencies

Butterfly does not report any activity to credit reporting agencies, therefore the participation in Butterfly's credit counseling session or financial education course will not impact your credit report.

Legal Advice

The counseling session and financial education course are meant to give you information and not meant to give legal advice or advise you to take a specific course of action. Your specific financial situation is personal and the financial plan you follow should be one of your own choosing. Information presented here is meant to be general and the opinion of the presenters.

Counselor Qualifications

All counselors on staff are educated, caring professionals and are certified as Financial Health Counselors or equivalent by an independent agency. Janet Swope is a counselor and trains staff, Janet has earned her Bachelor's degree and is certified as a Financial Health Counselor with over 17 years of experience as a financial counselor/educator.

Cost

The cost of this credit counseling session is \$25 for individuals or couples living in the same household. Couples are both required to participate in the session to receive a certificate of completion.

Joint Sessions

Couples can complete the session together but both are required to participate to receive a certificate of completion.

Fee Waiver Policy

This course is offered without regard to an individuals' ability to pay. If you feel that you do not have the ability to pay for the session please fill out this fee waiver request and email it along with a copy of any official document that shows income for each adult in the household (pay stubs, tax returns, social security statement, etc.), the number of people in your household, and your name and phone number to customerservice@butterflyfe.com. Butterfly will waive fees for families that are 150% of federal poverty guidelines or less. Download the Butterfly fee waiver request form.

Services Offered other Languages

Butterfly services are offered in English only. We will be happy to refer you to an Approved Agency in your preferred language.

Source of Funding

Butterfly's source of funding is the fee it receives for its credit counseling session and financial education course. Butterfly does not pay or receive fees or other consideration for referrals.

Disclosures

This counseling session is meant to give you information and not meant to give legal advice or advise you to take a specific course of action. Your specific financial situation is personal and the financial plan you follow should be one of your own choosing. Please also note that the analysis, the type of information presented and any conclusions drawn, are totally dependent upon the accuracy and completeness of the information you provide. Information presented here is meant to be general and any conclusion presented is merely the opinions of Butterfly's staff. Another person or organization may draw a different conclusion from the information you're presented.

The information presented is intended to be truthful, accurate and good intentioned. However we may not have envisioned or anticipated all possible interpretations of the material. Should you want to discuss the material or bring anything to our attention please do so by calling (844) 289-2701 or emailing jswope@butterflyfe.com.

Client Information

Your Information		Spouse Information	
First Name		Spouse First Name	
Last Name		Spouse Last Name	
Birth Date		Spouse Birth Date	
Last 4 Digits of SSN	Gender	Last 4 Digits of SSN	Gender

Are you filing for bankruptcy with your spouse?	How many children are in your household?
How many people are in your household?	What Chapter of bankruptcy you are filing? (7, 13, unsure or other)

Contact Information

Phone Number	Email Address (If you want counseling material sent through email)
Street Address (If you want counseling material sent to home address)	City, State and Zip Code (If you want counseling material sent to home address)

Attorney/Location

Attorney Code (if applicable)	Attorney Email	
County	State	What is your filing District?

Financial Information

Please answer all the following questions.

Do you pay a mortgage or rent?	M	R	Are you behind on your mortgage?	Yes	No
Are you currently in foreclosure?	Yes	No	Do you have a second home or property?	Yes	No
Are you planning to give up your property?	Yes	No	Are you and/or your spouse currently employed?	Yes	No
Have you and/or your spouse recently experienced a job loss?	Yes	No	Are you behind in your credit card debt?	Yes	No

Have you taken any pay-day loans?	Yes	No	Are any collection agencies calling you?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Do you have any money saved for emergencies?	Yes	No	Do you have a vehicle payment?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Are you behind on your vehicle payment?	Yes	No	Has one of your vehicles been recently repossessed?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Are you in default status on a federal student loan?	Yes	No	Do you currently have any legal judgments against you?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Is the IRS or State tax collector taking action or threatening to take action against you?	Yes	No	Are you having your wages garnished for any reason other than child support?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Does this situation pertain to you? I have no income other than social security, disability or public assistance and own no property such as house or money in a bank account. My situation will not change or improve in the future.

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Please write the factors you feel best describe the root cause of your financial condition below.	

Payroll Income

Fill in income for each job you and your spouse work. Include your spouse's income even if they are not seeking a certificate.

Please note:

1. List each job separately. Do not list jobs more than once.
2. Job description is only requested so that you can identify the job.
3. Frequency of paycheck refers to how often you get paid (weekly, biweekly, monthly or twice per month)
4. Net Income Per Check is the amount of money you receive after taxes and other deductions for each pay period. (Per check not per month)

Job Description	Frequency of Paycheck	Net Income per Check	Monthly Income

Other Income

Please list any other income sources for either you or your spouse here.

Some examples of other income sources would be Social Security income, disability, bonuses, tips, Veterans Administration benefits, unemployment benefits, support payments, rental income, food stamps, and business net income.

This can include any monies received on a regular basis. Please list Net Income (money received after taxes and deductions).

Job Description	Frequency of Paycheck	Net Income per Check	Monthly Income

If you are not presently making monthly payments, please use the monthly payment that you would be asked for if you were not behind.

Mortgage For Your Home

Please list any mortgages or home equity loans for your primary residence here.

Description		Total Owed	Monthly Payment

Secured Loans

Secured loans used to finance the purchase of such items as campers, boats, and furniture. Only list secured loans here.

Description		Total Owed	Monthly Payment

Vehicle Loans and Leasing

Please list all payments for vehicle loans and leases.

Description		Total Owed	Monthly Payment

Personal Loans and Misc. Debt

Examples are bank loans not tied to any property, finance company loans, payday loans, and loans from friends or family. You can also list any miscellaneous debt here.

Description		Total Owed	Monthly Payment

Mortgage For Another Property

Please list any mortgages for rental properties, vacation or second homes.

Description		Total Owed	Monthly Payment

Student Loans

If you are not presently making monthly payments, please use the monthly payment that you would be asked for if you were not behind.

Description		Total Owed	Monthly Payment

Repossessed Vehicle

Please list any debt for vehicles that have been repossessed.

Description		Total Owed	Monthly Payment

Medical Bills

Please list only past due medical bills.

Description		Total Owed	Monthly Payment

If you are not presently making monthly payments, please estimate an average monthly payment that you would be asked for if you were not behind. An alternative would be to multiply the balance owed by .03 and insert this number as the monthly payment.

Credit Cards

If you are not making monthly payments on the credit cards listed, please estimate an average monthly payment that you would owe if you were not behind. An alternative is to multiply the balance by 0.03 and insert this number as the monthly payment.

Description	Total Owed	Monthly Payment

Back Federal and State Taxes

Not taxes due for this coming tax season

Description	Total Owed	Monthly Payment

Judgements

Please list any judgments against you. (Formal decisions made by a court following a lawsuit)

Description	Total Owed	Monthly Payment

Living Expenses

Please list living expenses below, the monthly amounts will be calculated by the counselor.

Clothing Expenses

Description	Frequency	Amount	Monthly Payment
Clothing Expenses (Shoes, Clothing, etc.)			
Laundry and Dry Cleaning (out of home)			

Entertainment Expenses

Description	Frequency	Amount	Monthly Payment
Netflix, Hulu, Amazon Prime etc.			
Gifts (Holiday and other)			
Vacation Expenses			
Movies (Theater or Rental)			
Events (Concerts, sports etc.)			

Food and Toiletries Expenses

Description	Frequency	Amount	Monthly Payment
Food, Grocery, and Personal Items			
Work and School Lunches			
Dining Out, Take Out			

Medical and Health Expenses

Description	Frequency	Amount	Monthly Payment
Health Insurance Not Payroll Deducted			
Other Insurance Not Payroll Deducted			
Out of Pocket Medical and Prescription			
Health Club or Gym Payments			

Housing Expenses

Description	Frequency	Amount	Monthly Payment
Home Owner's Assoc. Dues			
Lot Fees			
Home Improvements and Maintenance			
Real Estate Taxes (If not included in Mortgage)			
Home Owners Insurance (not included in mortgage)			
Rent			
Renters Insurance			

Savings

Description	Frequency	Amount	Monthly Payment
Money Set Aside For Savings			
Investments (Not payroll deducted)			
Emergency Fund			
Life Insurance (not payroll deducted)			
Health Club or Gym Payments			

Transportation Expenses

Description	Frequency	Amount	Monthly Payment
Automobile Insurance Payments			
Gasoline/Vehicle Fuel			
Vehicle Maintenance			
Vehicle Licensing, Registration and Other			
Public Transportation, Tolls and Parking			

Miscellaneous Expenses			
Description	Frequency	Amount	Monthly Payment
Children's Activities and/or School Tuition			
Child/Day Care			
Child or Spousal Support (Not payroll deducted)			
Support For Dependants Living Outside The Home			
Charitable Contributions			
Pet Expenses and Vet Bills			
Personal Grooming (Haircuts and Salon)			
Newspaper and Magazine Subscription			
Savings for Yearly Taxes (Self employed)			
Alcohol/Tobacco			

Utilities			
Description	Frequency	Amount	Monthly Payment
Electricity			
Heating Fuel			
Water and/or Sewer			
Telephone			
Cellular Telephone			
Internet Provider			
Cable/Satellite			
Garbage Pickup			

By submitting this form, I duly attest that I (we) have participated in Butterfly Financial Education's credit counseling course and in doing so have provided information that is true and correct to the best of my knowledge and ability.

I also understand that I (we), the person(s) named here, have not only participated in this session but will read the material provided by this session and will receive a Certificate of Completion that will expire in 180 days from the date of completion.

You have now completed the intake portion of the credit counseling session. Please check to see that all the information has been completed, An incomplete form cannot be processed.

If you are submitting by e-mail, please save a copy to your computer and e-mail the attached form to: jswope@butterflyfe.com. Once we have received your form we will look over your information and e-mail or mail you a budget analysis and information packet regarding your situation and possible alternatives along with your Certificate of Completion. Be aware that you will receive the report with your Certificate of Completion no later than one business day after your Financial Information Form is submitted. The Certificate of Completion will be dated for the date you get your information packet. Should you have any questions regarding the information please call 1-844-289-2701.

If you are submitting by phone, once the form is completed please call 1-844-289-2701 and a staff member will record your information. Once it has been submitted a counselor will go over your information and e-mail your budget analysis and information packet to you. Your Certificate of Completion will be generated on the same date that your custom report is sent to you. Be aware that you will receive the report with your Certificate of Completion no later than one business day after your Financial Information Form is submitted.

To submit by mail send the completed form and a return address to the address above or email to customerservice@butterflyfe.com Please have the certificate in hand before filing for Bankruptcy, it is important not to assume we have received your Financial Information Form or that we could process it as received. Once you have the Credit Counseling Completion Certificate in hand, you can proceed as you wish in regards to filing a bankruptcy. SIGNATURE_____