

# QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

## Section 26 - Financial Record

26.1 In the last seven (7) years have you filed a petition under any chapter of the bankruptcy code?  YES  NO (If NO, proceed to 26.2)

Complete the following if you responded 'Yes' to in the last seven (7) years having filed a petition under any chapter of the bankruptcy code.

### Entry #1

Select the applicable bankruptcy petition type. Provide the bankruptcy court docket/account number.

Chapter 7  Chapter 11  Chapter 13

Provide the date bankruptcy was filed. (Month/Year)  Est. Provide the date of bankruptcy discharge. (Month/Year)  Not Applicable  Est. Provide the total amount (in U.S. dollars) involved in the bankruptcy.  Est.

Provide the name debt is recorded under. Last name First name Middle name Suffix

Provide the name of the court involved.

Provide the address of the court involved. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street City State Zip Code Country

(a) If Chapter 13 previously selected:  
Provide the name of the trustee for this bankruptcy.

Provide the address of the trustee for this bankruptcy. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street City State Zip Code Country

Were you discharged of all debts claimed in the bankruptcy?  YES (Provide explanation)  NO (Provide explanation)  
Provide Explanation.

### Entry #2

Select the applicable bankruptcy petition type. Provide the bankruptcy court docket/account number.

Chapter 7  Chapter 11  Chapter 13

Provide the date bankruptcy was filed. (Month/Year)  Est. Provide the date of bankruptcy discharge. (Month/Year)  Not Applicable  Est. Provide the total amount (in U.S. dollars) involved in the bankruptcy.  Est.

Provide the name debt is recorded under. Last name First name Middle name Suffix

Provide the name of the court involved.

Provide the address of the court involved. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)


Street City State Zip Code Country

(a) If Chapter 13 previously selected:  
Provide the name of the trustee for this bankruptcy.

Provide the address of the trustee for this bankruptcy. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street City State Zip Code Country

Were you discharged of all debts claimed in the bankruptcy?  YES (Provide explanation)  NO (Provide explanation)  
Provide Explanation.

Enter your Social Security Number before going to the next page 

## QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

**Section 26 - Financial Record - (Continued)**

**26.2** Have you **EVER** experienced financial problems due to gambling?  YES  NO (If NO, proceed to 26.3)

Complete the following if you responded 'Yes' to having **EVER** experienced financial problems due to gambling.

<b>Entry #1</b>	
Provide the date range of your financial problems due to gambling. Provide an estimate of the amount (in U.S. dollars) of gambling losses incurred.	
From Date (Month/Year) <input type="checkbox"/> Est.	To Date (Month/Year) <input type="checkbox"/> Present <input type="checkbox"/> Est.
Provide a description of your financial problems due to gambling. If you have taken any action(s) to rectify your financial problems due to gambling, provide a description of your actions. If you have not taken any action(s), provide explanation.	
<b>Entry #2</b>	
Provide the date range of your financial problems due to gambling. Provide an estimate of the amount (in U.S. dollars) of gambling losses incurred.	
From Date (Month/Year) <input type="checkbox"/> Est.	To Date (Month/Year) <input type="checkbox"/> Present <input type="checkbox"/> Est.
Provide a description of your financial problems due to gambling. If you have taken any action(s) to rectify your financial problems due to gambling, provide a description of your actions. If you have not taken any action(s), provide explanation.	

**26.3** In the past seven (7) years have you failed to file or pay Federal, state, or other taxes when required by law or ordinance?  YES  NO (If NO, proceed to 26.4)

Complete the following if you responded 'Yes' to having failed to file or pay Federal, state, or other taxes when required by law or ordinance.

<b>Entry #1</b>		
Did you fail to file, pay as required, or both? <input type="checkbox"/> File <input type="checkbox"/> Pay <input type="checkbox"/> Both		Provide the year you failed to file or pay your Federal, state, or other taxes. <input type="checkbox"/> Est.
Provide the reason(s) for your failure to file or pay required taxes.	Provide the Federal, state, or other agency to which you failed to file or pay taxes.	Provide the type of taxes you failed to file or pay (such as property, income, sales, etc.).
Provide the amount (in U.S. dollars) of the taxes. <input type="checkbox"/> Est.	Provide date satisfied. (Month/Year)	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Est.
Provide a description of any action(s) you have taken to satisfy this debt (such as withholdings, frequency and amount of payments, etc.). If you have not taken any action(s) provide explanation.		
<b>Entry #2</b>		
Did you fail to file, pay as required, or both? <input type="checkbox"/> File <input type="checkbox"/> Pay <input type="checkbox"/> Both		Provide the year you failed to file or pay your Federal, state, or other taxes. <input type="checkbox"/> Est.
Provide the reason(s) for your failure to file or pay required taxes.	Provide the Federal, state, or other agency to which you failed to file or pay taxes.	Provide the type of taxes you failed to file or pay (such as property, income, sales, etc.).
Provide the amount (in U.S. dollars) of the taxes. <input type="checkbox"/> Est.	Provide date satisfied. (Month/Year)	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Est.
Provide a description of any action(s) you have taken to satisfy this debt (such as withholdings, frequency and amount of payments, etc.). If you have not taken any action(s) provide explanation.		

Enter your Social Security Number before going to the next page →

## QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

**Section 26 - Financial Record - (Continued)**

**26.4** In the past seven (7) years have you been counseled, warned, or disciplined for violating the terms of agreement for a travel or credit card provided by your employer?  YES  NO (If NO, proceed to 26.5)

Complete the following if you responded 'Yes' to having been counseled, warned, or disciplined for violating the terms of agreement for a travel or credit card provided by your employer.

**Entry #1**

Provide the name of the agency or company.

Provide the address of the agency or company. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street	City	State	Zip Code	Country
--------	------	-------	----------	---------

Provide the date of your counseling, warning, or disciplinary action. (Month/Year)	Provide the reason(s) for the counseling, warning, or disciplinary action
--	---

Est.

Provide the amount (in U.S. dollars) of violation.

Provide a description of any action(s) you have taken to rectify this situation. If you have not taken any action(s) provide explanation.

Est.

**Entry #2**

Provide the name of the agency or company.

Provide the address of the agency or company. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street	City	State	Zip Code	Country
--------	------	-------	----------	---------

Provide the date of your counseling, warning, or disciplinary action. (Month/Year)	Provide the reason(s) for the counseling, warning, or disciplinary action
--	---

Est.

Provide the amount (in U.S. dollars) of violation.

Provide a description of any action(s) you have taken to rectify this situation. If you have not taken any action(s) provide explanation.

Est.

**26.5** Are you currently utilizing, or seeking assistance from, a credit counseling service or other similar resource to resolve your financial difficulties?  YES  NO (If NO, proceed to 26.6)

Complete the following if you responded 'Yes' to being currently utilizing, or seeking assistance from, a credit counseling service or other similar resource to resolve your financial difficulties.

**Entry #1**

Provide explanation.	Provide the name of the credit counseling organization or resource.
----------------------	---

Provide the telephone number of the credit counseling organization.

Telephone number	Extension	<input type="checkbox"/> International or DSN phone number	<input type="checkbox"/> Day <input type="checkbox"/> Night
------------------	-----------	--	---

Provide the location of the credit counseling organization.

City	State
------	-------

As a result of this counseling, provide a description of any action(s) you have taken to resolve your financial difficulties. If you have not taken any action(s), provide explanation.

**Entry #2**

Provide explanation.	Provide the name of the credit counseling organization or resource.
----------------------	---

Provide the telephone number of the credit counseling organization.

Telephone number	Extension	<input type="checkbox"/> International or DSN phone number	<input type="checkbox"/> Day <input type="checkbox"/> Night
------------------	-----------	--	---

Provide the location of the credit counseling organization.

City	State
------	-------

As a result of this counseling, provide a description of any action(s) you have taken to resolve your financial difficulties. If you have not taken any action(s), provide explanation.

Enter your Social Security Number before going to the next page →

## QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

**Section 26 - Financial Record - (Continued)**

- 26.6** Other than previously listed, have any of the following happened to you? (You will be asked to provide details about each financial obligation that pertains to the items identified below)  YES  NO (If NO, Proceed to 26.7)
- In the past seven (7) years, you have been delinquent on alimony or child support payments.
  - In the past seven (7) years, you had a judgment entered against you. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
  - In the past seven (7) years, you had a lien placed against your property for failing to pay taxes or other debts. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
  - You are currently delinquent on any Federal debt. (Include financial obligations for which you are the sole debtor, as well as those for which you are a cosigner or guarantor).

Complete the following if you answered 'Yes' to having experienced one or more of the previously stated financial issues.

**Entry #1**

Provide the name of agency/organization/individual to which debt is/was owed.

Did/does this financial issue include any of the following? (Check all that apply)  YES  NO (If NO, Proceed to 26.7)

- In the past seven (7) years, you have been delinquent on alimony or child support payments.
- In the past seven (7) years, you had a judgment entered against you. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
- In the past seven (7) years, you had a lien placed against your property for failing to pay taxes or other debts. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
- You are currently delinquent on any Federal debt. (Include financial obligations for which you are the sole debtor, as well as those for which you are a cosigner or guarantor).

Provide the associated loan/account number(s) involved. Identify/describe the type of property involved (if any).

Provide the amount (in U.S. dollars) of the financial issue.  Est. Provide the reason(s) for the financial issue. Provide the current status of the financial issue.

Provide the date the financial issue began. (Month/Year)  Est. Provide date the financial issue was resolved. (Month/Year)  Not Resolved  Est. Provide the name of the court involved.

Provide the address of the court involved. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street	City	State	Zip Code	Country
--------	------	-------	----------	---------

Provide a description of any action(s) you have taken to satisfy this debt (such as withholdings, frequency and amount of payments, etc.). If you have not taken any action(s), provide explanation.

Enter your Social Security Number before going to the next page →

## QUESTIONNAIRE FOR NATIONAL SECURITY POSITIONS

**Section 26 - Financial Record - (Continued)**

Complete the following if you answered 'Yes' to having experienced one or more of the previously stated financial issues.

**Entry #2**

Provide the name of agency/organization/individual to which debt is/was owed.

Did/does this financial issue include any of the following? (Check all that apply)

YES     NO (If NO, Proceed to 26.7)

- In the past seven (7) years, you have been delinquent on alimony or child support payments.
- In the past seven (7) years, you had a judgment entered against you. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
- In the past seven (7) years, you had a lien placed against your property for failing to pay taxes or other debts. (Include financial obligations for which you were the sole debtor, as well as those for which you were a cosigner or guarantor).
- You are currently delinquent on any Federal debt. (Include financial obligations for which you are the sole debtor, as well as those for which you are a cosigner or guarantor).

Provide the associated loan/account number(s) involved.    Identify/describe the type of property involved (if any).

Provide the amount (in U.S. dollars) of the financial issue.    Provide the reason(s) for the financial issue.    Provide the current status of the financial issue.

Est.

Provide the date the financial issue began. (Month/Year)

Est.

Provide date the financial issue was resolved. (Month/Year)

Not Resolved

Est.

Provide the name of the court involved.

Provide the address of the court involved. (Provide City and Country if outside the United States; otherwise, provide City, State and Zip Code)

Street

City

State

Zip Code

Country

Provide a description of any action(s) you have taken to satisfy this debt (such as withholdings, frequency and amount of payments, etc.). If you have not taken any action(s), provide explanation.

Enter your Social Security Number before going to the next page

