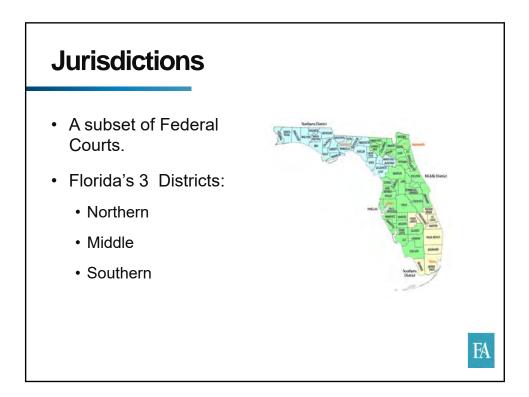




- A disclosure of the debtor's assets, liabilities, & exemptions
- An opportunity for objection by the creditors
- A valuation review by the trustee
- · A division of exempt/abandoned assets
- A discharge
 - Various options (Chapters) to facilitate

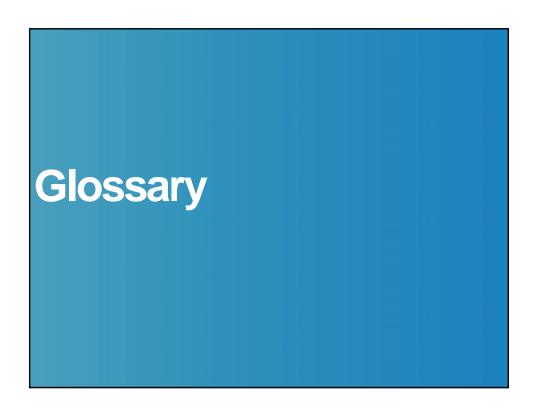
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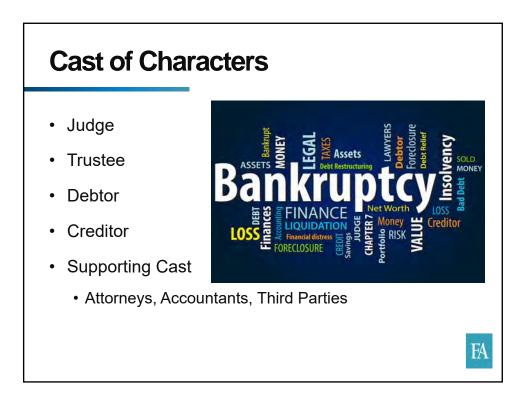


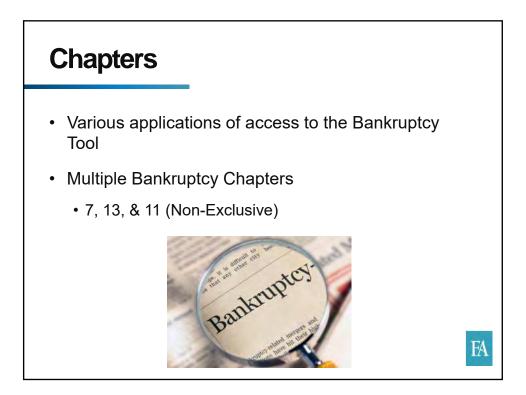
Spotting a Bankruptcy

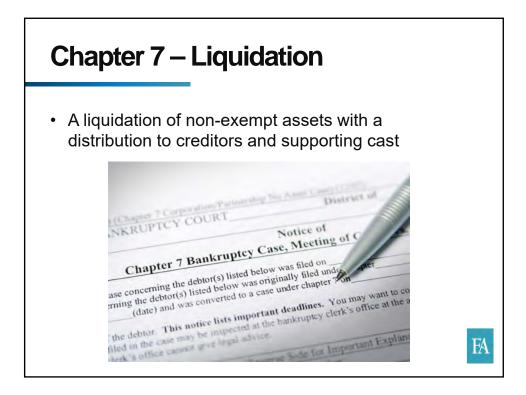
- When does it come up in title transactions?
 - A Suggestion of Bankruptcy appears in the chain
 - Disclosure by the Parties
 - May appear on County's Tax Collector's site
- Do I need to review it?
 - If any owner in the chain of the last 7 years has ever been in Bankruptcy while in title or within 4 years of being in title.

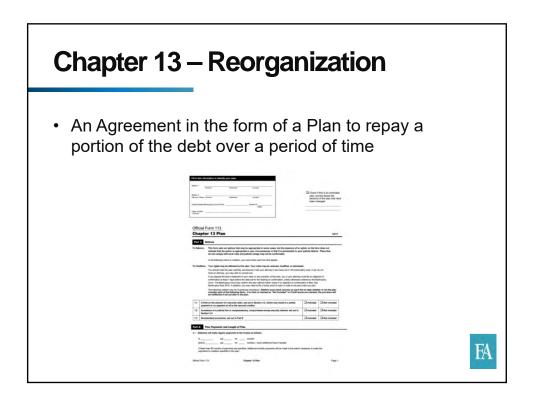












Fill in this in	formation to identify y	our case:	
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the: _		District of (State)
Case number (If known)			

Check if this is an amended plan, and list below the sections of the plan that have been changed.

Official Form 113 Chapter 13 Plan

12/17

To Debtor	: This form sets out options that may be appropriate in some cases, but the presence of an or indicate that the option is appropriate in your circumstances or that it is permissible in you do not comply with local rules and judicial rulings may not be confirmable.	•	
	In the following notice to creditors, you must check each box that applies.		
To Credito	s: Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminate	ed.	
	You should read this plan carefully and discuss it with your attorney if you have one in this bankru have an attorney, you may wish to consult one.	ptcy case. If you c	lo not
	If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney confirmation at least 7 days before the date set for the hearing on confirmation, unless otherwise of Court. The Bankruptcy Court may confirm this plan without further notice if no objection to confirm Bankruptcy Rule 3015. In addition, you may need to file a timely proof of claim in order to be paid	ordered by the Ba ation is filed. See	
	The following matters may be of particular importance. Debtors must check one box on each li includes each of the following items. If an item is checked as "Not Included" or if both box be ineffective if set out later in the plan.		
	imit on the amount of a secured claim, set out in Section 3.2, which may result in a partial yment or no payment at all to the secured creditor	Included	Not included
	oidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in ction 3.4	Included	Not included
1.3 N	nstandard provisions, set out in Part 8	Included	Not included

Part 2: Plan Payments and Length of Plan

2.1 Debtor(s) will make regular payments to the trustee as follows:

\$_____ per____ for ____ months

[and \$ _____ per_____ for ____ months.] Insert additional lines if needed.

If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

2.2 Regular payments to the trustee will be made from future income in the following manner:

Check all that apply.

- Debtor(s) will make payments pursuant to a payroll deduction order.
- Debtor(s) will make payments directly to the trustee.
- Other (specify method of payment):

2.3 Income tax refunds.

Check one.

- Debtor(s) will retain any income tax refunds received during the plan term.
- Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.
- Debtor(s) will treat income tax refunds as follows:

2.4 Additional payments.

Check one.

- **None.** If "None" is checked, the rest of § 2.4 need not be completed or reproduced.
- Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.

2.5 The total amount of estimated payments to the trustee provided for in §§ 2.1 and 2.4 is \$

Part 3: Treatment of Secured Claims

3.1 Maintenance of payments and cure of default, if any.

Check one.

None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced.

The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, with any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Any existing arrearage on a listed claim will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated. Unless otherwise ordered by the court, the amounts listed on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) control over any contrary amounts listed below as to the current installment payment and arrearage. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Collateral	Current installment payment (including escrow)	Amount of arrearage (if any)	Interest rate on arrearage (if applicable)	Monthly plan payment on arrearage	Estimated total payments by trustee
		 \$ Disbursed by: Trustee Debtor(s) 	\$	%	\$	\$
		\$ Disbursed by: ☐ Trustee ☐ Debtor(s)	\$	%	\$	\$

Insert additional claims as needed.

3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.

None. If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

The debtor(s) request that the court determine the value of the secured claims listed below. For each non-governmental secured claim listed below, the debtor(s) state that the value of the secured claim should be as set out in the column headed *Amount of secured claim*. For secured claims of governmental units, unless otherwise ordered by the court, the value of a secured claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below. For each listed claim, the value of the secured claim will be paid in full with interest at the rate stated below.

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

The holder of any claim listed below as having value in the column headed *Amount of secured claim* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of:

- (a) payment of the underlying debt determined under nonbankruptcy law, or
- (b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Name of creditor	Estimated amount Collateral of creditor's total claim	Value of collateral	Amount of claims senior to creditor's claim	Amount of secured claim	Interest rate	Monthly payment to creditor	Estimated total of monthly payments
	\$	\$	\$	\$	%	\$	\$
	\$	\$	\$	\$	%	\$	\$

Insert additional claims as needed.

3.3 Secured claims excluded from 11 U.S.C. § 506.

Check one.

None. If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

The claims listed below were either:

- (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or
- (2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated total payments by trustee
		\$	%	 \$	\$
Insert additional claims as needed		\$	%	 \$ Disbursed by: Trustee Debtor(s) 	\$

3.4 Lien avoidance.

Check one.

□ None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced. The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan. The amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

Information regarding judicial lien or security interest	Calculation of lien avoidance		Treatment of remaining secured claim
Name of creditor	a. Amount of lien	\$	Amount of secured claim after avoidance (line a minus line f)
	b. Amount of all other liens	\$	\$
Collateral	c. Value of claimed exemptions	+ \$	Interest rate (if applicable)
	d. Total of adding lines a, b, and c	\$	%
Lien identification (such as judgment date, date of lien recording, book and page number)	e. Value of debtor(s)' interest in property	- \$	Monthly payment on secured claim \$
	f. Subtract line e from line d.	\$	Estimated total payments on secured claim \$
	Extent of exemption impairment		
	(Check applicable box):		
	Line f is equal to or greater than lin	ne a.	
	The entire lien is avoided. (Do not co	mplete the next column.)	
	Line f is less than line a.		
	A portion of the lien is avoided. (Com	plete the next column.)	

Insert additional claims as needed.

3.5 Surrender of collateral.

Check one.

□ None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

The debtor(s) elect to surrender to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay under § 1301 be terminated in all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be treated in Part 5 below.

Name of creditor	Collateral

Insert additional claims as needed.

Part 4: Treatment of Fees and Priority Claims

4.1 General

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

4.2 Trustee's fees

Trustee's fees are governed by statute and may change during the course of the case but are estimated to be _____% of plan payments; and during the plan term, they are estimated to total \$_____.

4.3 Attorney's fees

The balance of the fees owed to the attorney for the debtor(s) is estimated to be \$_____

4.4 Priority claims other than attorney's fees and those treated in § 4.5.

Check one.

None. If "None" is checked, the rest of § 4.4 need not be completed or reproduced.

The debtor(s) estimate the total amount of other priority claims to be ______

4.5 Domestic support obligations assigned or owed to a governmental unit and paid less than full amount.

Check one.

None. If "None" is checked, the rest of § 4.5 need not be completed or reproduced.

□ The allowed priority claims listed below are based on a domestic support obligation that has been assigned to or is owed to a governmental unit and will be paid less than the full amount of the claim under 11 U.S.C. § 1322(a)(4). This plan provision requires that payments in § 2.1 be for a term of 60 months; see 11 U.S.C. § 1322(a)(4).

Name of creditor	Amount of claim to be paid
	\$
	\$
Insert additional claims as needed.	

Part 5: Treatment of Nonpriority Unsecured Claims

5.1 Nonpriority unsecured claims not separately classified.

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. *Check all that apply.*

The sum of \$

% of the total amount of these claims, an estimated payment of \$

The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

5.2 Maintenance of payments and cure of any default on nonpriority unsecured claims. Check one.

- □ None. If "None" is checked, the rest of § 5.2 need not be completed or reproduced.
- The debtor(s) will maintain the contractual installment payments and cure any default in payments on the unsecured claims listed below on which the last payment is due after the final plan payment. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The claim for the arrearage amount will be paid in full as specified below and disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Current installment payment	Amount of arrearage to be paid	Estimated total payments by trustee
	 Disbursed by: Trustee Debtor(s) 	\$	\$
	 \$ Disbursed by: Trustee Debtor(s) 	\$	\$

Insert additional claims as needed.

5.3 Other separately classified nonpriority unsecured claims. Check one.

None. If "None" is checked, the rest of § 5.3 need not be completed or reproduced.

The nonpriority unsecured allowed claims listed below are separately classified and will be treated as follows

Name of creditor	Basis for separate classification and treatment	Amount to be paid on the claim	Interest rate (if applicable)	Estimated total amount of payments
		\$	%	\$
		\$	%	\$

Insert additional claims as needed.

Part 6:

Executory Contracts and Unexpired Leases

6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. *Check one.*

□ None. If "None" is checked, the rest of § 6.1 need not be completed or reproduced.

Assumed items. Current installment payments will be disbursed either by the trustee or directly by the debtor(s), as specified below, subject to any contrary court order or rule. Arrearage payments will be disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage (Refer to other plan section if applicable)	Estimated total payments by trustee
		 Disbursed by: Trustee Debtor(s) 	\$		\$
		\$ Disbursed by: □ Trustee	\$		\$
Insert additional contracts or lea	ases as needed.	Debtor(s)			

Part 7: Vesting of Property of the Estate

7.1 Property of the estate will vest in the debtor(s) upon

Check the applicable box:

- plan confirmation.
- entry of discharge.
- other:

Part 8: Nonstandard Plan Provisions

8.1 Check "None" or List Nonstandard Plan Provisions

None. If "None" is checked, the rest of Part 8 need not be completed or reproduced.

Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.

The following plan provisions will be effective only if there is a check in the box "Included" in § 1.3.

Part 9: Signature(s):

9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if any, must sign below.

Signature of Debtor 1	Signature of Debtor 2
Executed on	Executed on
MM / DD / YYYY	MM / DD
	Date
,	Date
Signature of Attorney for Debtor(s)	MM / DD / YYYY

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

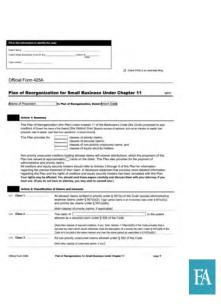
Exhibit: Total Amount of Estimated Trustee Payments

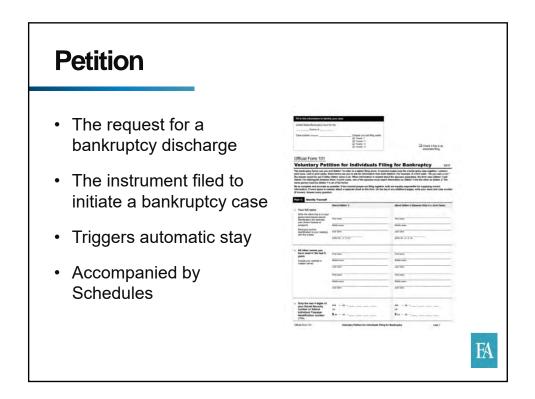
The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a.	Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)		\$
b.	Modified secured claims (Part 3, Section 3.2 total)		\$
C.	Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)		\$
d.	Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)		\$
e.	Fees and priority claims (Part 4 total)		\$
f.	Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)		\$
g.	Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)		\$
h.	Separately classified unsecured claims (Part 5, Section 5.3 total)		\$
i.	Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total)		\$
j.	Nonstandard payments (Part 8, total)	+	\$
	Total of lines a through j		\$

Chapter 11 – Reorganization

- An Agreement in the form of a Plan to repay a portion of the debt over a period of time...
 - While maintaining possession and control over the asset
 - Debtor becomes
 Debtor-in-Possession





Fill in this information to identify the case:				
Debtor Name				
United States Bankruptcy Court for the:	District of (State)			
Case number:				

Check if this is an amended filing

Official Form 425A

Plan of Reorganization for Small Business Under Chapter 11

12/17

[Name of Proponent]'s Plan of Reorganization, Dated [Insert Date]

Article 1: Summary

This Plan of Reorganization (the *Plan*) under chapter 11 of the Bankruptcy Code (the *Code*) proposes to pay creditors of [insert the name of the Debtor] (the *Debtor*) from [Specify sources of payment, such as an infusion of capital, loan proceeds, sale of assets, cash flow from operations, or future income].

This Plan provides for:

C
С
С
С

classes of priority claims; classes of secured claims; classes of non-priority unsecured clams; and classes of equity security holders.

Non-priority unsecured creditors holding allowed claims will receive distributions, which the proponent of this Plan has valued at approximately cents on the dollar. This Plan also provides for the payment of administrative and priority claims.

All creditors and equity security holders should refer to Articles 3 through 6 of this Plan for information regarding the precise treatment of their claim. A disclosure statement that provides more detailed information regarding this Plan and the rights of creditors and equity security holders has been circulated with this Plan. Your rights may be affected. You should read these papers carefully and discuss them with your attorney, if you have one. (If you do not have an attorney, you may wish to consult one.)

Article 2: Classification of Claims and Interests				
2.01	OI Class 1 All allowed claims entitled to priority under § 507(a) of the Code (except ac expense claims under § 507(a)(2), ["gap" period claims in an involuntary case under and priority tax claims under § 507(a)(8)).			
		[Add classes of priority claims, if applicable]		
2.02	2.02 Class 2 The claim of allowed as a secured claim under § 506 of the Code.		extent	
		[Add other classes of secured creditors, if any. <i>Note</i> : Section 1129(a)(9)(D) of the Code provides secured tax claim which would otherwise meet the description of a priority tax claim under § 507 Code is to be paid in the same manner and over the same period as prescribed in § 507(a)(8).]		
2.03	Class 3	All non-priority unsecured claims allowed under § 502 of the Code.		
		[Add other classes of unsecured claims, if any.]		

Case number

2.04 Class 4..... Equity interests of the Debtor. [If the Debtor is an individual, change this heading to The interests of the individual Debtor in property of the estate.]

Article 3: Treatment of Administrative Expense Claims, Priority Tax Claims, and Quarterly and Court Fees				
3.01	Unclassified claims	Under section § $1123(a)(1)$, administrative expense claims, ["gap" period claims in an involuntary case allowed under § 502(f) of the Code,] and priority tax claims are not in classes.		
3.02	Administrative expense claims	Each holder of an administrative expense claim allowed under § 503 of the Code, [and a "gap" claim in an involuntary case allowed under § 502(f) of the Code,] will be paid in full on the effective date of this Plan, in cash, or upon such other terms as may be agreed upon by the holder of the claim and the Debtor.		
3.03	Priority tax claims	Each holder of a priority tax claim will be paid [Specify terms of treatment consistent with § 1129(a)(9)(C) of the Code].		
3.04	Statutory fees	All fees required to be paid under 28 U.S.C. § 1930 that are owed on or before the effective date of this Plan have been paid or will be paid on the effective date.		
3.05	Prospective quarterly fees	All quarterly fees required to be paid under 28 U.S.C. § 1930(a)(6) or (a)(7) will accrue and be timely paid until the case is closed, dismissed, or converted to another chapter of the Code.		

Article 4: Treatment of Claims and Interests Under the Plan

4.01 Claims and interests shall be treated as follows under this Plan:

		Class	Imp	pairment	Treatment
		Class 1 - Priority claims excluding those in Article 3		Impaired Unimpaired	[Insert treatment of priority claims in this Class, including the form, amount and timing of distribution, if any. For example: "Class 1 is unimpaired by this Plan, and each holder of a Class 1 Priority Claim will be paid in full, in cash, upon the later of the effective date of this Plan, or the date on which such claim is allowed by a final non-appealable order. Except:
		Class 2 – Secured claim of [<i>Insert name of secured creditor</i> .]		Impaired Unimpaired	[Insert treatment of secured claim in this Class, including the form, amount and timing of distribution, if any.] [Add classes of secured claims if applicable]
		Class 3 – Non-priority unsecured creditors		Impaired Unimpaired	[Insert treatment of unsecured creditors in this Class, including the form, amount and timing of distribution, if any.] [Add administrative convenience class if applicable]
		Class 4 - Equity security holders of the Debtor		Impaired Unimpaired	[Insert treatment of equity security holders in this Class, including the form, amount and timing of distribution, if any.]
	Article 5: Allowance an	nd Disallowance of Claim	S		
5.01	Disputed claim	A <i>disputed claim</i> is a cappealable order], and as			t been allowed or disallowed [by a final non-
		(i) a proof of claim h interest has filed a			eemed filed, and the Debtor or another party in
		(ii) no proof of claim disputed, continge			nd the Debtor has scheduled such claim as ed.
5.02	Delay of distribution on a disputed claim	No distribution will be allowed [by a final non-appending)			t of a disputed claim unless such claim is
Offici	al Form 425A	Plan of Reorganization f	or Sr	nall Business U	nder Chapter 11 page 2

Case number_

03	Settlement of disputed claims	The Debtor will have the power and authority to settle and compromise a disputed claim with court approval and compliance with Rule 9019 of the Federal Rules of Bankruptcy Procedure.
	Article 6: Provisions fe	or Executory Contracts and Unexpired Leases
6.01	Assumed executory contracts and unexpired	(a) The Debtor assumes, and if applicable assigns, the following executory contracts and unexpired leases as of the effective date:
	leases	[List assumed, or if applicable assigned, executory contracts and unexpired leases.]
		(b) Except for executory contracts and unexpired leases that have been assumed, and if applicable assigned, before the effective date or under section 6.01(a) of this Plan, or that are the subject of a pending motion to assume, and if applicable assign, the Debtor will be conclusively deemed to have rejected all executory contracts and unexpired leases as of the effective date.
		A proof of a claim arising from the rejection of an executory contract or unexpired lease under this section must be filed no later than days after the date of the order confirming this Plan.
	Article 7: Means for In	nplementation of the Plan
		[Insert here provisions regarding how the plan will be implemented as required under § 1123(a)(5) of the
		Code. For example, provisions may include those that set out how the plan will be funded, including any claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.]
	Article 8: General Pro	claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.]
3.01	Article 8: General Pro Definitions and rules of construction	claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.]
3.01	Definitions and rules of	claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.] visions The definitions and rules of construction set forth in §§ 101 and 102 of the Code shall apply when terms defined or construed in the Code are used in
	Definitions and rules of	claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.] visions The definitions and rules of construction set forth in §§ 101 and 102 of the Code shall apply when terms defined or construed in the Code are used in this Plan, and they are supplemented by the following definitions:
3.02	Definitions and rules of construction	claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.] visions The definitions and rules of construction set forth in §§ 101 and 102 of the Code shall apply when terms defined or construed in the Code are used in this Plan, and they are supplemented by the following definitions: [Insert additional definitions if necessary]. The effective date of this Plan is the first business day following the date that is 14 days after the entry of the confirmation order. If, however, a stay of the confirmation order is in effect on that date, the effective date will be the first business day after the date on which the stay expires or is otherwise
3.02	Definitions and rules of construction Effective date	 claims reserve to be established in connection with the plan, as well as who will be serving as directors, officers or voting trustees of the reorganized Debtor.] visions The definitions and rules of construction set forth in §§ 101 and 102 of the Code shall apply when terms defined or construed in the Code are used in this Plan, and they are supplemented by the following definitions: [Insert additional definitions if necessary]. The effective date of this Plan is the first business day following the date that is 14 days after the entry of the confirmation order. If, however, a stay of the confirmation order is in effect on that date, the effective date will be the first business day after the date on which the stay expires or is otherwise terminated. If any provision in this Plan is determined to be unenforceable, the determination will in no way limit or affect the enforceability and operative

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[8.06	Controlling ef	Unless a rule of law or procedure is supplied by federal law (including the Code or the Federal Rules of Bankruptcy Procedure), the laws of the State of govern this Plan and any agreements, documents, and instruments executed in connection with this Plan, except as otherwise provided in this Plan.]		
[8.07	Corporate go	[If the Debtor is a corporation include provisions required by § 1123(a)(6) of the Code.]		
[8.08	Retention of .	risdiction Language addressing the extent and the scope of the bankruptcy court's jurisdiction after the effective date of the plan.]	1	
	Article 9	Discharge		
	Check one boy			
9.01		Discharge if the Debtor is an individual and § 1141(d)(3) is not applicable. Confirmation of this Plan does not discharge any debt provided for in this Plan until the court grants a discharge on completion of all payments under this Plan, or as otherwise provided in § 1141(d)(5) of the Code. The Debtor will not be discharged from any debt excepted from discharge under § 523 of the Code, except as provided in Rule 4007(c) of the Federal Rules of Bankruptcy Procedure.		
		Discharge if the Debtor is a partnership and § 1141(d)(3) is not applicable. On the effective date of this Plan, the Debtor will be discharged from any debt that arose before confirmation of this Plan, to the extent specified in § 1141(d)(1)(A) of the Code. The Debtor will not be discharged from any debt imposed by this Plan.		
		Discharge if the Debtor is a corporation and § 1141(d)(3) is not applicable. On the effective date of this Plan, the Debtor will be discharged from any debt that arose before confirmation of this Plan, to the extent specified in § 1141(d)(1)(A) of the Code, except that the Debtor will not be discharged of any debt:		
		(i) imposed by this Plan; or		
		(ii) to the extent provided in § 1141(d)(6).		
		No discharge if § 1141(d)(3) is applicable. In accordance with § 1141(d)(3) of the Code, the Debtor will not receive any discharge of debt in this bankruptcy case.		

Article 10: Other Provisions

[Insert other provisions, as applicable.]

Respectfully submitted,

х

[Signature of the Plan Proponent]

X

[Signature of the Attorney for the Plan Proponent]

[Printed Name]

[Printed Name]

Official Form 425A

Fill in this information to identify your case:

United States Bankruptcy Court for the:

District of

Case number (If known):	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Check if this is an
amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy 12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture		
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
_			
2.	All other names you have used in the last 8 years	First name	First name
	- Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of		
	your Social Security number or federal	XXX – XX –	XXX – XX –
	Individual Taxpayer Identification number	9 xx - xx	9 xx - xx
	(ITIN)		

Debtor 1		Case number (if known)
First Name Middle N	ame Last Name	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers	I have not used any business names or EINs.	I have not used any business names or EINs.
(EIN) you have used in the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	Number Street	Number Street
	City State ZIP Code	City State ZIP Code
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	□ I have another reason. Explain. (See 28 U.S.C. § 1408.)	□ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1			Last Name		Case number (if kr	own)		
	First Name Middle Nam	le	Last Name					
Pa	art 2: Tell the Court Abou	it Your B	ankrup	otcy Case				
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	🖵 Cha	Chapter 7					
		🖵 Cha	Chapter 11					
		🖵 Cha	oter 12					
		Chap	oter 13					
8.	How you will pay the fee	local your subr with I nee Appl I req By la less pay	court f self, yo nitting y a pre-p ed to pa ication uest th iw, a ju than 15 the fee	dge may, but is not required to, v 50% of the official poverty line that	hay pay. Typicall check, or money ur attorney may p u choose this op <i>Fee in Installme</i> request this opti waive your fee, a at applies to you his option, you m	y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the <i>nts</i> (Official Form 103A). ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the <i>Application to Have the</i>		
9.	Have you filed for bankruptcy within the last 8 years?	No Ves.	District	When	MM / DD / YYYY	Case number		
			District	When	MM / DD / YYYY	Case number		
			District	When		Case number		
					MM / DD / YYYY			
10.	Are any bankruptcy	🔲 No						
	cases pending or being filed by a spouse who is	C Yes.	Debtor			_ Relationship to you		
	not filing this case with you, or by a business partner, or by an affiliate?		District	When	MM / DD / YYYY	Case number, if known		
	anniate:		Debtor			_ Relationship to you		
			District	When	MM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	No. Yes.	No Ve:	our landlord obtained an eviction judg . Go to line 12.		? <i>Against You</i> (Form 101A) and file it as		

Debtor	1
--------	---

First Name Middle Name

Last Name

Case number (if known)_

Are you a sole proprietor of any full- or part-time	No. Go to Part 4.					
business?	🛛 Yes.	Yes. Name and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or	ī	Name of business, if any				
LLC.	Ì	Number Street				
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		City	State ZIP Code			
		Check the appropriate by	ay to describe your husiness.			
		Check the appropriate box to describe your business:				
		 Freattr Care Busiliess (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) 				
		□ None of the above				
<i>debtor?</i> For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D).	No.	 I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 				
		Bankruptcy Code.				
Part 4: Report if You Own	l		erty or Any Property That Needs Immediate Attention			
4. Do you own or have any	l		erty or Any Property That Needs Immediate Attention			
4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	or Have A		erty or Any Property That Needs Immediate Attention			
4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	or Have A	Any Hazardous Prope	erty or Any Property That Needs Immediate Attention			
4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	or Have A	Any Hazardous Prope				

City

ZIP Code

State

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

First Name

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

- □ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
	Long ourrently on active military

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Middle Name

Last Name

Case number (if known)_

Pa	art 6: Answer These Que	stions for Reporting Purposes	5				
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	you nave .	 No. Go to line 16b. Yes. Go to line 17. 					
			16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
		No. Go to line 16c.Yes. Go to line 17.					
		16c. State the type of debts you o	we that are not consumer de	bts or business debts.			
17.	Are you filing under Chapter 7?	□ No. I am not filing under Cha	pter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses a	7. Do you estimate that after are paid that funds will be av	any exempt property is excluded and ailable to distribute to unsecured creditors?			
18.	How many creditors do you estimate that you	1 -49	1 ,000-5,000	25,001-50,000			
	owe?	 □ 50-99 □ 100-199 □ 200-999 	5,001-10,00010,001-25,000	☐ 50,001-100,000 ☐ More than 100,000			
19.	How much do you estimate your assets to be worth?	 \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million 	 □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million 	Image: on Image: \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion			
	How much do you estimate your liabilities to be? art 7: Sign Below	 \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million 	 ↓ \$1,000,001-\$10 million ↓ \$10,000,001-\$50 million ↓ \$50,000,001-\$100 million ↓ \$100,000,001-\$500 million 	n s500,000,001-\$1 billion on \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion			
_	or you	I have examined this petition, and correct.	I declare under penalty of pe	erjury that the information provided is true and			
				proceed, if eligible, under Chapter 7, 11,12, or 13 under each chapter, and I choose to proceed			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		•	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			in fines up to \$250,000, or in	obtaining money or property by fraud in connection nprisonment for up to 20 years, or both.			
		×	×	·			
		Signature of Debtor 1		Signature of Debtor 2			
		Executed on	·YY	Executed on			

Debtor 1		Case number (if known)	
First Name Middle Nam	e Last Name		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in to proceed under Chapter 7, 11, 12, or available under each chapter for which the the notice required by 11 U.S.C. § 342(the second se	13 of title 11, United States Code, and the person is eligible. I also certify the	d have explained the relief at I have delivered to the debtor(s)
If you are not represented by an attorney, you do not	knowledge after an inquiry that the infor		
need to file this page.	X	Date	
	Signature of Attorney for Debtor		MM / DD /YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	Bar number	State	

Debtor 1

First Name

Last Name

Case number (if known)_

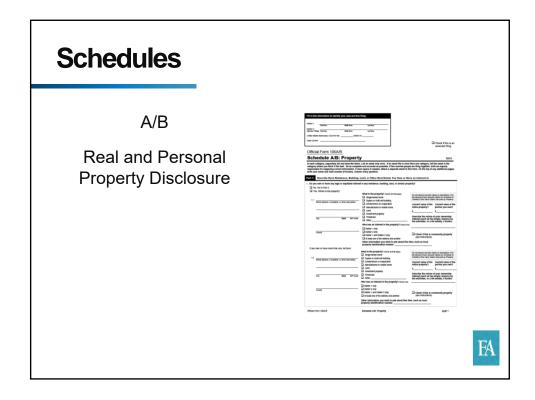
For you if you are filing this The law allows you, as an individual, to represent yourself in bankruptcy court, but you bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by To be successful, you must correctly file and handle your bankruptcy case. The rules are very an attorney, you do not technical, and a mistake or inaction may affect your rights. For example, your case may be need to file this page. dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? No □ Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? **Ves** Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. X х Signature of Debtor 1 Signature of Debtor 2 Date Date MM / DD / YYYY MM / DD / YYYY Contact phone Contact phone

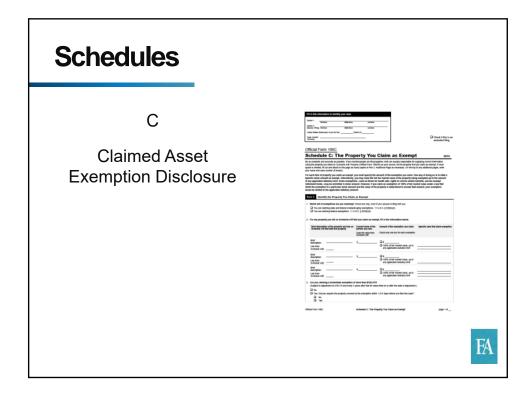
Cell phone

Email address

Cell phone

Email address





Fill in this information to identify your case and this filing:				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: District of				
Case number				

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

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 responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		Land, or Other Real Estate You Own or Hav			
_		st in any residence, building, land, or similar prope	erty?		
U No. Go					
☐ Yes. Wr	nere is the property?	What is the property? Check all that apply.	Do not deduct secured cla the amount of any secure		
1.1. <u>Street</u>	t address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ms Secured by Property.	
		 Condominium or cooperative Manufactured or mobile home 	Current value of the entire property?	Current value of the portion you own?	
		 Land Investment property 	\$	\$	
City	State ZIP Code	 Timeshare Other 	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by	
		Who has an interest in the property? Check one.			
Count	ty	 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only 	Check if this is co	ommunity property	
		At least one of the debtors and another	(see instructions)		
		Other information you wish to add about this it property identification number:			
If you own c	or have more than one, list here:	What is the property? Check all that apply. Single-family home	Do not deduct secured cla		
1.2	t address, if available, or other description	 Duplex or multi-unit building 	the amount of any secured claims or Creditors Who Have Claims Secured		
011001		Condominium or cooperativeManufactured or mobile home	Current value of the entire property?	Current value of the portion you own?	
		Land	\$	\$	
City	City State ZIP Code	 Investment property Timeshare Other 	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by	
		Who has an interest in the property? Check one.			
		Debtor 1 only			
Count	ty	Debtor 2 only			
		 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Check if this is co (see instructions)	this is community property ructions)	
		Other information you wish to add about this ite property identification number:	m, such as local		

Last Name

1.3. Street address, if available, or other description City State ZIP Code County	 What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clair</i> Current value of the entire property? \$ Describe the nature of interest (such as fee the entireties, or a life	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
	 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	Check if this is community property (see instructions)	
	Other information you wish to add about this ite property identification number:		
2. Add the dollar value of the portion you own for a you have attached for Part 1. Write that number	II of your entries from Part 1, including any entries here.		\$
Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable intere you own that someone else drives. If you lease a vehic 3. Cars, vans, trucks, tractors, sport utility vehicles Image: Im	le, also report it on <i>Schedule G: Executory Contracts a</i>	and Unexpired Leases.	
3.1. Make: Model:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clair</i>	d claims on Schedule D:
Year: Approximate mileage: Other information:	 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see 	Current value of the entire property?	Current value of the portion you own?
If you own or have more than one, describe here: 3.2. Make: Model: Year: Approximate mileage: Other information:	 instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see 	Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clain</i> Current value of the entire property? \$	d claims on Schedule D:
Other information:	Check if this is community property (see instructions)	\$	\$

Last Name

3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
0.01	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		At least one of the debtors and another		
	Other information:	Check if this is community property (see	\$	\$
		instructions)		
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another		
	Other information:	Check if this is community property (see instructions)	\$	\$
	⁄es	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
4.1.	Make:	Debtor 1 only	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see instructions)	\$	\$
lf you	u own or have more than one, list here:			
4.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Other information:	 Debtor 1 and Debtor 2 only At least one of the debtors and another 	entire property?	portion you own?
		Check if this is community property (see instructions)	\$	\$
Add	the dollar value of the portion you own for	all of your entries from Part 2, including any entries	s for pages	¢
		here		Ψ

Pa	art 3: Describe Your Personal and Household Items	
Do	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	_
	Yes. Describe	\$
7	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	Yes. Describe	\$
8.	Collectibles of value	
	 Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No 	_
	Yes. Describe	\$
9	Equipment for sports and hobbies	
5.	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No □ Yes. Describe	\$
10	Firearms	
	<i>Examples:</i> Pistols, rifles, shotguns, ammunition, and related equipment	
	Yes. Describe	\$
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	\$
12	. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	No Yes. Describe	\$
13	Non-farm animals Examples: Dogs, cats, birds, horses	
	\square No	
		\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	O No	
	Yes. Give specific information.	\$
15	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	_
.0	for Part 3. Write that number here	\$

Middle Name Last Name

you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Cash <i>Examples:</i> Money you	have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petitio	าก
🖵 No			
		Cash:	\$
and other s	avings, or other financial acco imilar institutions. If you have r	unts; certificates of deposit; shares in credit unions, brokerage h nultiple accounts with the same institution, list each.	ouses,
No No			
Q Yes		Institution name:	
	17.1. Checking account:		\$
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		
	17.7. Other financial account:		
	17.8. Other financial account:		
	17.9. Other financial account:		
			¥
	or publicly traded stocks	kerage firms, money market accounts	
□ No			
☐ Yes	Institution or issuer name:		
			\$
			\$
Non-publicly traded s an LLC, partnership,		orated and unincorporated businesses, including an interes	t in
□ No	Name of entity:	% of ownersh	ip:
Yes. Give specific		9	% \$
information about			
information about them			% \$

Last Name

Negotiable instruments Non-negotiable instrum	include personal checks, cashiers' checks, promissory notes, and money orders.	
•	<i>ents</i> are those you cannot transfer to someone by signing or delivering them.	
NoYes. Give specific	Issuer name:	
information about		•
them		\$
		\$
		\$
Detirement er nension		
Retirement or pension Examples: Interests in I	RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
D No		
Yes. List each		
account separately.	Type of account: Institution name:	
	401(k) or similar plan:	\$
	Pension plan:	\$
	IRA:	\$
	Retirement account:	\$
	Keogh:	\$
	Additional account:	\$
	Additional account:	\$
	prepayments d deposits you have made so that you may continue service or use from a company with landlords, prepaid rept, public utilities (electric, das, water), telecommunications	
<i>Examples:</i> Agreements companies, or others		
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
<i>Examples:</i> Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas:	\$ \$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$ \$ \$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$ \$ \$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	^
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$\$ \$\$
Examples: Agreements companies, or others	d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	\$\$ \$\$\$\$\$\$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$\$ \$\$ \$\$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$\$ \$\$ \$\$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$\$ \$\$ \$\$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Other: Other:	\$\$ \$\$ \$\$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric:	\$\$ \$\$ \$\$ \$\$ \$\$
Examples: Agreements companies, or others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Other: Other:	\$\$ \$\$ \$\$\$

Last Name

24. Interests in an education IRA, in an 26 U.S.C. §§ 530(b)(1), 529A(b), and	account in a qualified ABLE program, or under a qualified st 529(b)(1).	ate tuition program.	
🔲 No			
Yes Institut	tion name and description. Separately file the records of any inter	ests.11 U.S.C. § 521(c)	:
			\$
			¢
			φ
			\$
25. Trusts, equitable or future interests exercisable for your benefit	in property (other than anything listed in line 1), and rights o	or powers	
□ No			-
Yes. Give specific			
information about them			\$
	ade secrets, and other intellectual property absites, proceeds from royalties and licensing agreements		\$
27. Licenses, franchises, and other ger <i>Examples</i> : Building permits, exclusive	neral intangibles licenses, cooperative association holdings, liquor licenses, profe	ssional licenses	
□ No			_
Yes. Give specific			
information about them			\$
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
Yes. Give specific information		-	
about them, including whether		Federal:	Þ
you already filed the returns and the tax years.		State:	§
		Local:	\$
	1		
29. Family support <i>Examples:</i> Past due or lump sum alim	ony, spousal support, child support, maintenance, divorce settlen	nent, property settlemer	nt
D No			
Yes. Give specific information			
-		Alimony:	\$
		Maintenance:	\$
		Support:	\$
		Divorce settlement:	\$
		Property settlement:	\$
30. Other amounts someone owes you	<u>-</u>		
Examples: Unpaid wages, disability in	surance payments, disability benefits, sick pay, vacation pay, wo npaid loans you made to someone else	rkers' compensation,	
D No			-
Yes. Give specific information			
			\$

	insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance	
 No Yes. Name the insurance com of each policy and list its 		Beneficiary:	Surrender or refund value:
			\$
		ce policy, or are currently entitled to receive	
Yes. Give specific information.			\$
	ether or not you have filed a lawsuit or it to su		V
□ No			
Yes. Describe each claim			\$
34. Other contingent and unliquidate to set off claims	ed claims of every nature, including cou	interclaims of the debtor and rights	
Yes. Describe each claim			\$
			· ·
35. Any financial assets you did not	already list		
NoYes. Give specific information.			
			\$
	ur entries from Part 4, including any ent re	ries for pages you have attached	€
Part 5: Describe Any Busi	iness-Related Property You Ow	n or Have an Interest In. List ar	ny real estate in Part 1.
No. Go to Part 6.	equitable interest in any business-relation	ted property?	
Yes. Go to line 38.			Current value of the
			portion you own? Do not deduct secured claims
60 A			or exemptions.
38. Accounts receivable or commiss	sions you already earned		
C Yes. Describe			\$
39. Office equipment, furnishings, a	and supplies		T
Examples: Business-related computers	, software, modems, printers, copiers, fax machi	nes, rugs, telephones, desks, chairs, electronic de	vices
🗖 No			

Middle Name

Last Name

Case number (if known)

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade		
□ No		
Yes. Describe		\$
41. Inventory		
No		1
Yes. Describe		\$
42. Interests in partnerships or joint ventures		
No		
Yes. Describe Name of entity:	% of ownership:	
	%	\$
	%	\$
	%	\$
43. Customer lists, mailing lists, or other compilations		
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
No		-
Yes. Describe		\$
44. Any business-related property you did not already list		
No		
Yes. Give specific		\$
		\$
		\$
		\$
		\$
	<u> </u>	
		\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have at		\$
for Part 5. Write that number here	→	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Ha	vo an Interact In	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Ha If you own or have an interest in farmland, list it in Part 1.	ve an interest in	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related prop	erty?	
 No. Go to Part 7. Yes. Go to line 47. 		
Yes. Go to line 47.		
		Current value of the portion you own?
		Do not deduct secured claims
47. Farm animals		or exemptions.
<i>Examples</i> : Livestock, poultry, farm-raised fish		
D No		
□ Yes]
		\$
		¥

Debtor 1	Case number (if known)	
First Name Middle Name Last Na	Name	
48. Crops—either growing or harvested		
□ No		
Yes. Give specific information		\$
49. Farm and fishing equipment, implements, mac	chinery, fixtures, and tools of trade	
□ Yes		\$
50. Farm and fishing supplies, chemicals, and fee	ed	
No		
U Yes		
		\$
51. Any farm- and commercial fishing-related prop	operty you did not already list	
Yes. Give specific information		\$
-	m Part 6, including any entries for pages you have attached →	\$
	- L	
Part 7: Describe All Property You Ov	wn or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you di Examples: Season tickets, country club membership	did not already list?	
□ Yes. Give specific		\$
information		\$
		\$
54. Add the dollar value of all of your entries from	n Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of	of this Form	
55. Part 1: Total real estate, line 2	→ ×	\$
56. Part 2: Total vehicles, line 5	\$	
57. Part 3: Total personal and household items, lin	ine 15 \$	
58. Part 4: Total financial assets, line 36	\$	
59. Part 5: Total business-related property, line 45		
60. Part 6: Total farm- and fishing-related property		
61. Part 7: Total other property not listed, line 54		
62. Total personal property. Add lines 56 through 6	61Copy personal property total ➔ +	\$
63. Total of all property on Schedule A/B. Add line	e 55 + line 62	\$

Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	ankruptcy Court for the:	District of				
Case number (If known)			-			

Check if this is an amended filing

Official Form 106C Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property	You Claim a	s Exempt
	i a ching the troperty		

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

□ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
	Brief description: Line from Schedule A/B:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
	Brief description: Line from Schedule A/B:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
(Are you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered I No Yes 	years after that for cases	. ,	

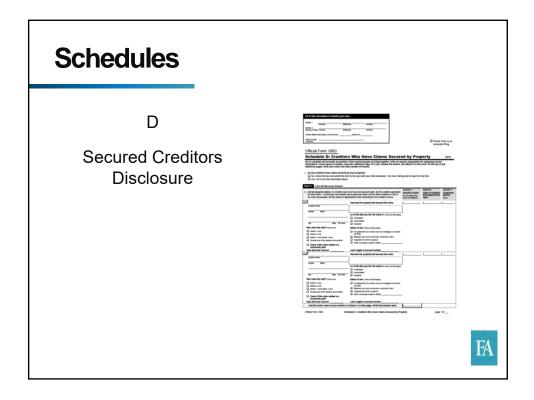
Part 2:

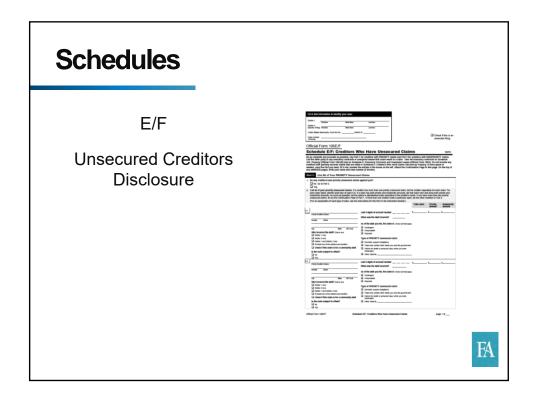
First Name

Additional Page

Middle Name Last Name

	on of the property and line //B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$\$ \$ \$ \$	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$\$ \$ \$ \$	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	





Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of						
Case number(If known)						

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- **Yes.** Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has r for each claim. If more than one creditor h As much as possible, list the claims in alp	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]		
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code				
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
2.2	Last 4 digits of account number Describe the property that secures the claim:	\$	\$	\$
		\$	\$	\$
2.2 Creditor's Name		\$	\$	\$
2.2	Describe the property that secures the claim:	\$	\$	\$
2.2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply.	\$	\$	\$
2.2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent	\$	\$	\$
2.2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply.	\$	\$	\$
2.2 Creditor's Name Number Street	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	\$	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one.	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)	\$	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	\$	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	\$	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	\$]	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	\$]	\$	\$
2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	\$] -	\$	\$

Middle Name Last Name Case number (if known)_

Part 1:	Additional Page After listing any entr by 2.4, and so forth.		age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
L			Describe the property that secures the claim:	\$	\$	\$
Credito	or's Name]		
Numbe	er Street					
			As of the date you file, the claim is: Check all that apply.			
			Contingent			
City	State	ZIP Code	UnliquidatedDisputed			
	wes the debt? Check one.		Nature of lien. Check all that apply.			
	otor 1 only		An agreement you made (such as mortgage or secured			
	otor 2 only otor 1 and Debtor 2 only		car loan) Statutory lien (such as tax lien, mechanic's lien)			
	east one of the debtors and	another	Judgment lien from a lawsuit			
	eck if this claim relates t	0.3	Other (including a right to offset)			
	nmunity debt	o a				
Date de	ebt was incurred		Last 4 digits of account number			
			Describe the property that secures the claim:	\$	\$	\$
Credito	or's Name			1		
Numbe	er Street					
			As of the date you file, the claim is: Check all that apply.	1		
			Contingent			
City	State	ZIP Code				
	wes the debt? Check one.		Disputed			
	otor 1 only		Nature of lien. Check all that apply.			
	otor 2 only		An agreement you made (such as mortgage or secured car loan)			
	otor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic's lien)			
At le	east one of the debtors and	another	Judgment lien from a lawsuit			
	eck if this claim relates t mmunity debt	o a	Other (including a right to offset)	-		
Date de	ebt was incurred		Last 4 digits of account number			
			Describe the property that secures the claim:	\$	\$	\$
Credito	or's Name]		
Numbe	er Street	<u> </u>				
			As of the date you file, the claim is: Check all that apply.	1		
			Contingent			
City	State	ZIP Code	UnliquidatedDisputed			
Who ov	wes the debt? Check one.		Nature of lien. Check all that apply.			
	otor 1 only		An agreement you made (such as mortgage or secured			
	otor 2 only		car loan) Statutory lien (such as tax lien, mechanic's lien)			
	otor 1 and Debtor 2 only east one of the debtors and	another	 Judgment lien from a lawsuit 			
	eck if this claim relates t		Other (including a right to offset)	-		
cor	mmunity debt					
	ebt was incurred		Last 4 digits of account number		1	
			in Column A on this page. Write that number here:	\$		
	f this is the last page o Write that number here		add the dollar value totals from all pages. 44	\$		
Official F	Form 106D	Additional Pa	age of Schedule D: Creditors Who Have Claims Secu	red by Property	page	of

First Name Middle Name Last Name

Case number (if known)_

Pa	art 2:	List Others to Be N	otified for a Debt	That You Already	/ Listed
ag yo	ency is try u have mo	ring to collect from you	for a debt you owe to a any of the debts that	someone else, list th you listed in Part 1, l	a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
		<u></u>			_
	Number	Street			
					-
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					-
	City		State	ZIP Code	_
	City		State		
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					_
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
					-
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	Number	Street			
					-
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					-
	City		State	ZIP Code	-
	Ony		Glaic		

	al Form 106	<u>=/F</u> Creditors Wh	o Have IIn	
		_ /		
Case nu (If known				
United S	States Bankruptcy Court f	or the: District of	f	
Debtor 2 (Spouse,	if filing) First Name	Middle Name	Last Name	
	First Name	Middle Name	Last Name	
Debtor 2	1			

___.

Fill in this information to identify your case:

Check if this is an amended filing

cured Claims allors who

. . . .

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, 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 any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims								
 Do any creditors have priority unsecured claims No. Go to Part 2. Yes. 	s against you?							
each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the o unsecured claims, fill out the Continuation Page of	editor has more than one priority unsecured claim, list th a claim has both priority and nonpriority amounts, list th claims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim	at claim here ar ame. If you hav	nd show both e more than t	priority and wo priority				
(For an explanation of each type of claim, see the in	nstructions for this form in the instruction booklet.)	Total claim	Priority amount	Nonpriority amount				
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. 							
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	 Contingent Unliquidated Disputed 							
 Debtor 2 only Debtor 1 and Debtor 2 only 	Type of PRIORITY unsecured claim:							
 At least one of the debtors and another Check if this claim is for a community debt 	 Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated 							
Is the claim subject to offset? INO Yes	Other. Specify							
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$				
Number Street	As of the date you file, the claim is: Check all that apply	л.						
City State ZIP Code Who incurred the debt? Check one.	 Contingent Unliquidated Disputed 							
 Debtor 1 only Debtor 2 only 	Type of PRIORITY unsecured claim:							
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	 Taxes and certain other debts you owe the government Claims for death or personal injury while you were 							
 Check if this claim is for a community debt Is the claim subject to offset? No 	intoxicated Other. Specify	-						

Part 1:

Your PRIORITY Unsecured Claims – Continuation Page

Afte	er listing any entries on this page, number them	Total claim	Priority amount	Nonpriority amount	
		Last 4 digits of account number	\$	_ \$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		_			
	City State ZIP Code	Contingent Unliquidated			
	Who incurred the debt? Check one.				
	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	Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent Unliquidated			
	Who incurred the debt? Check one.				
	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			
		Claims for death or personal injury while you were intoxicated			
	Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated			
	Whe incurred the debt? Check and	Disputed			
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
	 Debtor 1 only Debtor 2 only 	_			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	 Taxes and certain other debts you owe the government Claims for death or personal injury while you were 			
	Check if this claim is for a community debt	intoxicated			
		Other. Specify			
	Is the claim subject to offset?				
	No No				
	C Yes				

First Name Middle Name Last Name	
Part 2: List All of Your NONPRIORITY Unsecured Claims	
3. Do any creditors have nonpriority unsecured claims against you?	
\Box No. You have nothing to report in this part. Submit this form to the court with your other schedules.	
Tes Yes	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a credited of the creditor who holds each claim.	ditor has more than one
nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it i	
included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than	
claims fill out the Continuation Page of Part 2.	
	Total claim
4.1 Last 4 digits of account number	¢
Nonpriority Creditor's Name When was the debt incurred?	Φ
Number Street	
City State ZIP Code As of the date you file, the claim is: Check all that ap	vla
Whe insurred the debt? Check and	
Who incurred the debt? Check one.	
Debtor 1 only Disputed	
 Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: 	
Check if this claim is for a community debt Obligations arising out of a separation agreement or that you did not report as priority claims	livorce
Is the claim subject to offset?	nilar debts
□ No □ Other. Specify	
The second	
4.2 Last 4 digits of account number	\$
Nonpriority Creditor's Name When was the debt incurred?	
Number Street	
As of the date you file, the claim is: Check all that ap	pply.
City State ZIP Code Contingent	
Who incurred the debt? Check one.	
Debtor 1 only Debtor 2 only	
 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans 	
 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or other 	livorce
 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Disputed 	
 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Disputed 	nilar debts
 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No 	nilar debts
 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or of that you did not report as priority claims Debts to pension or profit-sharing plans, and other simplements or that you for the pension or profit-sharing plans, and other simplements or the pension or profit plans. 	nilar debts
 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 	nilar debts
Important for the debit of orbits of the debits of a community debt Important between the debits of a community debt	nilar debts
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Last 4 digits of account number	nilar debts
Important for the debit of orbits of the debits of a community debt Important between the debits of a community debt	nilar debts
Important for the debit of order of	nilar debts
Implementation for a control of the debt of a community debt Implementation	nilar debts
Image: Chick of the debt of the deb	nilar debts
Image: Control of the debt is check with the claim is in the debt is check with the claim is for a community debt Image: Check if this claim is check all that an an another is the claim is check all that an another is the claim is check all that an another is the claim is check all that an another is the claim is check all that an another is the claim is the claim is check all that an another is the claim is th	nilar debts
Image: Street	nilar debts
Important of the other other other. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Nonpriority Creditor's Name Number Street City State Zity State Debtor 1 only Debtor 2 only Disputed Disputed Implementation and Debtor 2 only As of the date you file, the claim is: Check all that applicated Debtor 1 only Debtor 2 only Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 4	nilar debts
 Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Monpriority Creditor's Name Nonpriority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or of that you did not report as priority claims Debts to pension or profit-sharing plans, and other sin Other. Specify Men was the debt incurred? Mumber Street City State ZIP Code As of the date you file, the claim is: Check all that applicated Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: 	nilar debts
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Nonpriority Creditor's Name Number Street City State City State Debtor 1 only Debtor 2 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or of that you did not report as priority claims Debts to pension or profit-sharing plans, and other sile Other. Specify As of the date you file, the claim is: Check all that agr City State Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	nilar debts
Implementation and better of the debter state Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Nonpriority Creditor's Name Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Other. Specify Yes 4.3 Nonpriority Creditor's Name Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: State ZIP Code City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Othigations arising out of a separation agreement or other debtors and another	nilar debts
Implementation Debtor 1 only Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.3 Nonpriority Creditor's Name Number Street City State City State Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or othat you did not report as priority claims Debts to pension or profit-sharing plans, and other sing other sing plans, and other sing plans, and other sing othe	nilar debts\$ pply. divorce
Important to define debits of the debits of the debits of the debits and another Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Check if this claim is for a community debt Student loans No Obligations arising out of a separation agreement or or that you did not report as priority claims No Other. Specify Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number Street City State Debtor 1 only Debtor 2 only Debtor 2 only Contingent Unliquidated Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obtigations arising out of a separation agreement or of the debtors and another Student loans Debtor 2 only Debtor 2 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or of the debtors and another Check if this claim is for a community debt Obligations arising out of a separation agreement or of the debtors and ano	nilar debts

Pai	t 2: Your NONPRIORITY Unsecured Claims – Continu	uation Page	
Afte	er listing any entries on this page, number them beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	¢
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	 Contingent Unliquidated 	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that 	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code		
	Who incurred the debt? Check one.	 Unliquidated Disputed 	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Disputed	
	 Debtor 1 only Debtor 2 only 	Type of NONPRIORITY unsecured claim:	
	 Debtor 2 only Debtor 1 and Debtor 2 only 		
	At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that 	
	Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	
		Cther. Specify	

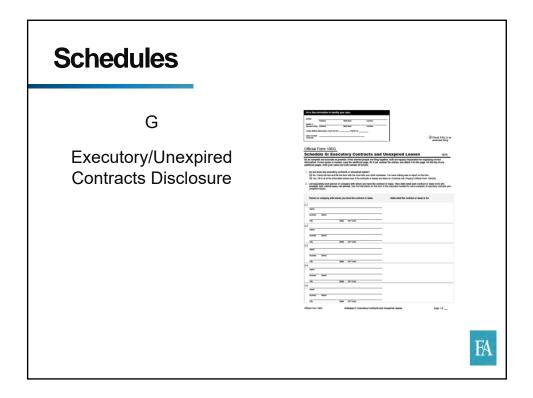
Part 3:

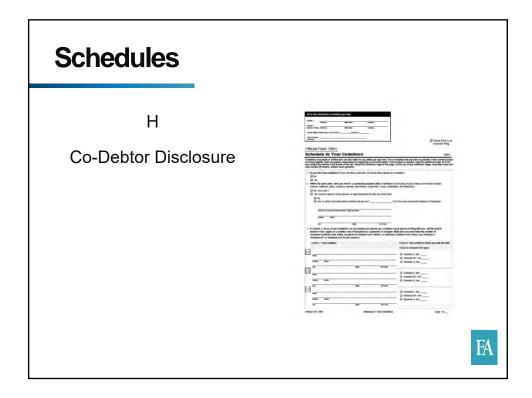
List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (<i>Check one</i>): U Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (<i>Check one</i>):
Number	Street			Part 2: Creditors with Phony Onsecured Claims
				Claims
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (<i>Check one</i>): D Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (<i>Check one</i>):
Number	Street		<u> </u>	Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	-
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
unio				Line of (<i>Check one</i>): 🖵 Part 1: Creditors with Priority Unsecured Claims
Number	Street		<u> </u>	□ Part 2: Creditors with Nonpriority Unsecured
				Claims
<u></u>				Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 4 on Part 9 did you list the entrined and iter 9
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): 🖵 Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			<u> </u>	Claims
City		State	ZIP Code	Last 4 digits of account number
,		Clait		
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (<i>Check one</i>): D Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
<u></u>				Last 4 digits of account number
City		State	ZIP Code	

Official Form 106E/F

Part 4: Ad	t 4: Add the Amounts for Each Type of Unsecured Claim								
6. Total the a Add the a	amounts of certain types of unsecured claims. This informa mounts for each type of unsecured claim.	ation is for statistical reporting purposes only. 28 U.S.C. § 159.							
		Total claim							
Total claims	6a. Domestic support obligations	6a							
from Part 1	6b. Taxes and certain other debts you owe the government	6b							
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$</u>							
	6d. Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} + _{\$}							
	6e. Total. Add lines 6a through 6d.	6e							
		Total claim							
Total claims	6f. Student loans	6f							
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$							
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$</u>							
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _{\$}							
	6j. Total. Add lines 6f through 6i.	6j							





Fill in this information to identify your case:						
Debtor						
Debtor 2 (Spouse If filing)	First Name	Middle Name Middle Name	Last Name			
United States Bankruptcy Court for the: District of						
Case number						

Check if this is an amended filing

Official Form 106G Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

D No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Sec. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease					State what the contract or lease is for
2.1						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.2						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.3						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.4						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.5						
	Name					
	Number	Street				
	City		State	ZIP Code		
					53	

Case number (if known)_

		Additional Page if	You Ha	we More Contracts or Leases	
	Perso	n or company with wh	om you	have the contract or lease	What the contract or lease is for
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				
	Numbe	er Street			-
	City		State	ZIP Code	
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	-
2					
	Name				-
	Numbe	er Street			-
	City		State	ZIP Code	

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City	
Official Form 106H	

Fill in this information to identify your case:							
Debtor 1							
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: District of							
Case number (If known)							

Check if this is an amended filing

Official Form 106H **Schedule H: Your Codebtors**

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Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

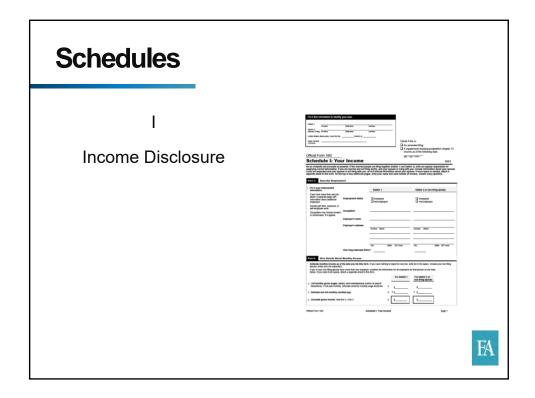
	Do you have any codebtors? (If you a D No D Yes	re filing a joint case, do i	not list either spouse as	a codebtor.)					
 Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) 									
	No. Go to line 3.								
	Yes. Did your spouse, former spouse	e or legal equivalent liv	e with you at the time?						
		c, or legal equivalent in	e with you at the time?						
		or territory did you live?	F	Fill in the name and current address of that person.					
	Name of your spouse, former spouse, or	legal equivalent							
	Number Street								
	City	State	ZIP Code						
3. I	n Column 1, list all of your codebtors	. Do not include your	spouse as a codebtor i	f your spouse is filing with you. List the person					
				Make sure you have listed the creditor on					
			m 106E/F), or Schedule	e G (Official Form 106G). Use Schedule D,					
	Schedule E/F, or Schedule G to fill or	it Column 2.							
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt					
				Check all schedules that apply:					
3.1									
	Name			Schedule D, line					
				Schedule E/F, line					
	Number Street			Schedule G, line					
	City	State	ZIP Code						
3.2				Gchedule D, line					
	Name			Schedule E/F, line					
	Number Street			Schedule G, line					
	City	State	ZIP Code						
2 2	City	State	ZIP Code						
3.3	Name			Schedule D, line					
	INGILIE			Schedule E/F, line					
	Number Street			□ Schedule G, line					
	City	State	ZIP Code						
			55						

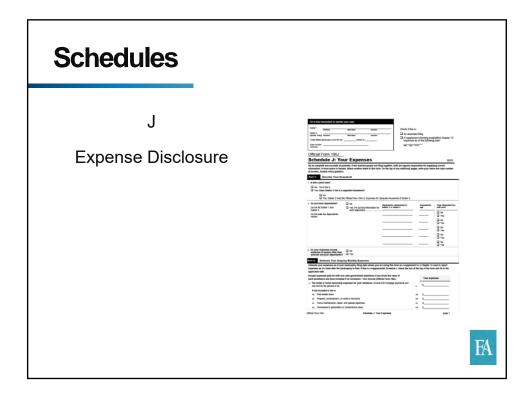
First Name Middle Name Last Name

Case number (if known)___

	A	dditional Page to Li	st More Codebtors		
	Column 1.	Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					Schedule D, line
	Name				Schedule E/F, line
					Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
	Name				Schedule D, line
					 Schedule E/F, line Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
μ	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
	- Chy			2	
3	Name				Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	- Tunibon				
	City		State	ZIP Code	
3					
	Name				 Schedule D, line Schedule E/F, line
					Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
-					

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Fill in this in	formation to ide	entify your case:		
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	r the: District o	f	
Case number				Check if this is:
(If known)				An amended filing
				A supplement showing postpetition chapter income as of the following date:
Official Fo	orm 106I			MM / DD / YYYY

Official Form 1061 Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-fi	ling spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	 Employed Not employed 	ed		EmployedNot employed	
	Include part-time, seasonal, or self-employed work.						
	Occupation may include student or homemaker, if it applies.	Occupation					
		Employer's name					
		Employer's address					
			Number Street			Number Street	
			City	Stat	e ZIP Code	City	State ZIP Code
		How long employed there	?				
P	art 2: Give Details About	Monthly Income					
	Estimate monthly income as of		lf you have nothir	ng to	report for any line, wr	ite \$0 in the space. Incl	ude your non-filing
	spouse unless you are separated. If you or your non-filing spouse ha	ave more than one employer,		rmatio	on for all employers fo	or that person on the line	es
	below. If you need more space, at	ttach a separate sheet to this	form.				
					For Debtor 1	For Debtor 2 or non-filing spouse	
2	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	\$	
3	Estimate and list monthly over	time pay.		3.	+\$	+ \$	
4	Calculate gross income. Add lin	ne 2 + line 3.		4.	\$	\$	

12/15

-					
D	e	h	n	r	1

Middle Name Last Name

Case number (if known)

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$	
5b. Mandatory contributions for retirement plans	5b.	\$		
5c. Voluntary contributions for retirement plans	5c.	\$ \$		
5d. Required repayments of retirement fund loans	5d.	\$		
5e. Insurance		ዋ ድ	\$	
	5e.	Φ		
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+ \$	_ + \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	\$	
2. Dension av ratizament income	0~	<u>^</u>	٠	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	_
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$]
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	+ \$	= \$
11. State all other regular contributions to the expenses that you list in Scher Include contributions from an unmarried partner, members of your household, y friends or relatives.			oommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are			enses listed in Schedule J.	
Specify:			11.	+ \$
12. Add the amount in the last column of line 10 to the amount in line 11. The	result	is the combined m	nonthly income.	
Write that amount on the Summary of Your Assets and Liabilities and Certain S	Statisti	ical Information, if i	t applies 12.	
13. Do you expect an increase or decrease within the year after you file this	form?	,		Combined monthly income
☐ Yes. Explain:				

Fill in this information to identify your case:				
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	District of		
Case number				

Official Form 106J

Schedule J: Your Expenses

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe Your Hou	sehold				
1. Is this a j	oint case?					
Ves. I	Go to line 2. Does Debtor 2 live in a s					
l	Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			
-	ave dependents? t Debtor 1 and	 No Yes. Fill out this information for each dependent 	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not sta names. 3. Do your e expense:	ate the dependents' expenses include s of people other than and your dependents?	 No Yes 		· -		 No Yes No Yes No Yes No Yes No Yes No Yes
Estimate yo	our expenses as of your is of a date after the ban	ng Monthly Expenses bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	•		•	•
-	•	-cash government assistance if you it on Schedule I: Your Income (Offic			Your expe	nses
 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 						
If not in	cluded in line 4:					
4a. Re	al estate taxes			4a.	\$	
4b. Pro	operty, homeowner's, or re	enter's insurance		4b.	\$	
4c. Ho	me maintenance, repair, a	and upkeep expenses		4c.	\$	
4d. Ho	meowner's association or	condominium dues		4d.	\$	

Debtor	1
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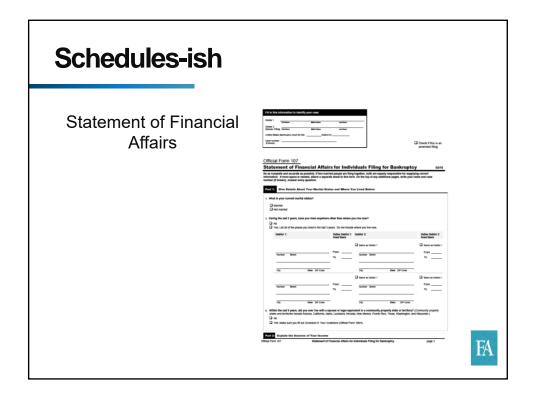
Middle Name

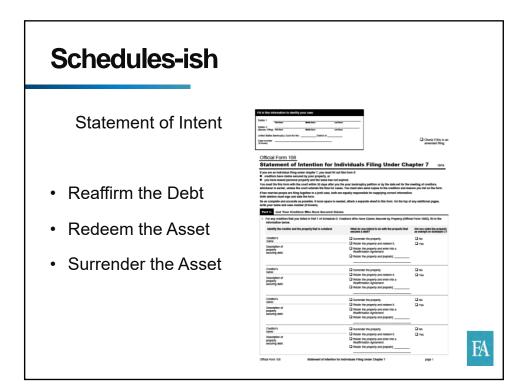
Last Name

Case number (if known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6	Utilities:		
0.	6a. Electricity, heat, natural gas	6а.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	Φ
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	ebtor 1 First Name Middle Name Last Name	Case number (if known)	
Calculate your monthly expenses. 22a. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 22a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23c. Po you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.			
22a. Add lines 4 through 21. 22a. \$	Other. Specify:	21.	+\$
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. Calculate your monthly net income. 23a. 23a. Copy line 12 (<i>your combined monthly income</i>) from <i>Schedule I</i> . 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage? N No.	Calculate your monthly expenses.		
22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$	22a. Add lines 4 through 21.	22a.	\$
Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Image: Subtract of the provided and the provi	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 22b.	\$
 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$			<u>.</u>
 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Copy your monthly expenses from line 22c above. 23b. Copy your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23c. Subtract an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. 	3. Calculate your monthly net income.		•
 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>. 23c. \$	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$
The result is your monthly net income. 23c. \$	23b. Copy your monthly expenses from line 22c above.	23b.	-\$
 4. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. 			¢
mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	The result is your <i>monthly net income</i> .	23c.	\$
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?			
mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.	Do you expect an increase or decrease in your expenses within the year after	you file this form?	
□ No.			
		f your mortgage?	
Yes. Explain here:	Explain here:		
	1		





Fill in this information to identify your case:				
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	District of		
Case number				

Check if this is an
amended filing

04/16

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1	Give Details About Y	our Marital Statu	is and Where Yo	ou Lived Before		
	at is your current marital sta Married Not married	tus?				
	ing the last 3 years, have yo No Yes. List all of the places you	·				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
	Number Street		From To	Same as Debtor 1		Same as Debtor 1 From To
	City	State ZIP Code		City	State ZIP Code	
	Number Street		From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
	City	State ZIP Code		City	State ZIP Code	
stat	Yes. Make sure you fill out Sc	ona, California, Idaho hedule H: Your Cod	o, Louisiana, Nevad	la, New Mexico, Puerto Ric	perty state or territory? (C o, Texas, Washington, and \	ommunity property Visconsin.)

Debtor	1
--------	---

Middle Name

Did you have any income from employment or from operating a business during this year or the two previous calendar years?
 Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No		
Yes. Fill	in the	details.

First Name

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	 Wages, commissions, bonuses, tips Operating a business 	\$	 Wages, commissions, bonuses, tips Operating a business 	\$
For last calendar year: (January 1 to December 31,)	 Wages, commissions, bonuses, tips Operating a business 	\$	 Wages, commissions, bonuses, tips Operating a business 	\$
For the calendar year before that: (January 1 to December 31,)	 Wages, commissions, bonuses, tips Operating a business 	\$	 Wages, commissions, bonuses, tips Operating a business 	\$

5. Did you receive any other income during this year or the two previous calendar years?

Last Name

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

🛛 No

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		\$ \$ \$		\$ \$ \$
For last calendar year: (January 1 to December 31,)		\$ \$ \$		\$ \$ \$
For the calendar year before that: (January 1 to December 31,)		\$ \$ \$		\$ \$ \$

ebtor 1	First Name Middle N		Last Name		Case r	number (if known)	
		ane	Last Name				
Part 3:	List Certain Payr	ments You	Made Befor	e You Filed	for Bankruptcy		
3. Are eit	her Debtor 1's or Del	btor 2's deb	ts primarily co	onsumer debt	s?		
🛛 No	. Neither Debtor 1 n	or Debtor 2	has primarily	consumer de	bts. Consumer debts ar	e defined in 11 U.S.C. § 101	1(8) as
	"incurred by an indiv	vidual primari	ily for a persor	al, family, or h	ousehold purpose."		. /
	During the 90 days	before you fil	led for bankrup	otcy, did you pa	ay any creditor a total of	\$6,425* or more?	
	No. Go to line 7	-					
	total amou child suppo	nt you paid th ort and alimo	nat creditor. Do ny. Also, do no	o not include p ot include payn	ayments for domestic su nents to an attorney for t		
	* Subject to adjustm	1ent on 4/01/	19 and every 3	s years after th	at for cases filed on or a	after the date of adjustment.	
Yes	s. Debtor 1 or Debtor						
	During the 90 days	before you fil	led for bankrup	otcy, did you pa	ay any creditor a total of	\$600 or more?	
	No. Go to line 7	-					
						otal amount you paid that	
	creditor. D alimony. A	o not include Iso, do not in	payments for clude payment	domestic supp ts to an attorne	ort obligations, such as by for this bankruptcy ca	child support and se.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
							_
	Creditor's Name	<u></u>			\$	\$	Mortgage
							Car
	Number Street						 Credit card Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Suppliers or vendors
		State	ZIP Code		\$	\$	Suppliers or vendors Other
		State	ZIP Code		\$	\$	Suppliers or vendors Other
	City Creditor's Name	State	ZIP Code		\$	\$	Suppliers or vendors Other Mortgage Car
	City	State	ZIP Code		\$	\$	Suppliers or vendors Other Mortgage Car Credit card
	City Creditor's Name	State	ZIP Code		\$	\$	Suppliers or vendors Other Mortgage Car
	City Creditor's Name Number Street				\$	\$	 Suppliers or vendors Other
	City Creditor's Name	State	ZIP Code		\$	\$	 Suppliers or vendors Other
	City Creditor's Name Number Street						 Suppliers or vendors Other
	City Creditor's Name Number Street				\$ \$	\$	Suppliers or vendors Other Other Car Credit card Loan repayment Suppliers or vendors Other Other Mortgage
	City Creditor's Name Number Street City						 Suppliers or vendors Other
	City Creditor's Name Number Street City						 Suppliers or vendors Other
	City Creditor's Name Number Street City Creditor's Name						 Suppliers or vendors Other
	City Creditor's Name Number Street City Creditor's Name						 Suppliers or vendors Other

7.	<i>Insic</i> corp ager	orations of which you are a	any gene n officer, less you d	ral partners; rel director, persor	atives of any g n in control, or	eneral partners; pa owner of 20% or m	artnerships of which nore of their voting	/ho was an insider? n you are a general partner; securities; and any managing domestic support obligations,
		No						
		es. List all payments to an	insider.					
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						\$	\$	
		Insider's Name				*	*	
		Number Street						
		City	State	ZIP Code				
	_	Ony	Otate					
						\$	\$	
		Insider's Name						
		Number Street						
		City	State	ZIP Code				
8.	With	in 1 year before you filed	for bank	ruptcy, did yo	u make any pa	ayments or transf	er any property o	n account of a debt that benefited
		nsider? Ide payments on debts gua	ranteed	or cosigned by a	an insider			
				o oolghou by t				
		No ∕es. List all payments that t	anafitad	an insider				
		res. List all payments that t	Jenenieu	an moider.	Dates of	Total amount	Amount you still	Reason for this payment
					payment	paid	owe	Include creditor's name
						\$	\$	
		Insider's Name				Ψ	Ψ	
		Number Street						
		Number Street						
		City	State	ZIP Code				
	_	Oity	Otate					
						\$	\$	
		Insider's Name						
		Number Street						
		Namber Greet						
		City	State	ZIP Code				

Case number (if known)

Debtor 1

First Name

Middle Name

Last Name

First Name Middle Name

Last Name

Case number (if known)

ontract disputes.	onal injury cases, s	small claims actions, di	vorces, collection suits, patern	ity actions, supp	ort or custody modificat
0					
es. Fill in the details.					
	Nature	of the case	Court or agency		Status of the case
Case title			Court Name		Pending
					On appeal
			Number Street		Concluded
Case number			City State	ZIP Code	
Case title			Court Name		Pending
					On appeal
			Number Street		Concluded
Case number				715.0	
			City State	ZIP Code	
o. Go to line 11. es. Fill in the information below	ν.	Describe the merced		Dette	Velue of the mount of
	Ι.	Describe the propert	У	Date	Value of the propert
es. Fill in the information below	ν.	Describe the propert	у	Date	Value of the propert
	Ι.	Describe the propert	У	Date	
es. Fill in the information below	<i>I</i> .	Describe the propert	<u>.</u>	Date	
es. Fill in the information below	<i>V.</i>	-	ned	Date	
es. Fill in the information below	<i>I</i> .	 Explain what happer Property was r Property was f 	ned epossessed. oreclosed.	Date	
es. Fill in the information below Creditor's Name Number Street		Explain what happer Property was r Property was f Property was g	ned epossessed. oreclosed. garnished.	Date	
es. Fill in the information below Creditor's Name Number Street	tate ZIP Code	 Explain what happen Property was r Property was f Property was g Property was a 	ned epossessed. oreclosed. garnished. attached, seized, or levied.		
es. Fill in the information below Creditor's Name Number Street		Explain what happer Property was r Property was f Property was g	ned epossessed. oreclosed. garnished. attached, seized, or levied.	Date	
es. Fill in the information below Creditor's Name Number Street		 Explain what happen Property was r Property was f Property was g Property was a 	ned epossessed. oreclosed. garnished. attached, seized, or levied.		\$
es. Fill in the information below Creditor's Name Number Street		 Explain what happen Property was r Property was f Property was g Property was a 	ned epossessed. oreclosed. garnished. attached, seized, or levied.		\$ Value of the proper
es. Fill in the information below Creditor's Name Number Street City Street		 Explain what happer Property was r Property was f Property was g Property was a 	ned epossessed. oreclosed. garnished. attached, seized, or levied.		\$ Value of the proper
es. Fill in the information below Creditor's Name Number Street City St Creditor's Name		Explain what happer Property was r Property was g Property was g Property was g Describe the propert Explain what happer	ned epossessed. oreclosed. garnished. attached, seized, or levied. y		\$ Value of the proper
es. Fill in the information below Creditor's Name Number Street City St Creditor's Name		 Explain what happer Property was r Property was g Property was a Property was a Describe the propert Explain what happer Property was r 	ned epossessed. oreclosed. garnished. attached, seized, or levied. y		\$ Value of the proper
es. Fill in the information below Creditor's Name Number Street City Street Creditor's Name Number Street		Explain what happer Property was r Property was g Property was g Property was g Describe the propert Explain what happer	ned epossessed. oreclosed. garnished. attached, seized, or levied. y		\$ Value of the proper

First Name Middle Name Last Nar	cy, did any creditor, including a bank or financial institutio	Date action was taken	nounts from your Amount
accounts or refuse to make a payment becau	use you owed a debt?	Date action was taken	
accounts or refuse to make a payment becau	use you owed a debt?	Date action was taken	
accounts or refuse to make a payment becau	use you owed a debt?	Date action was taken	
Creditor's Name	Describe the action the creditor took	was taken	Amount
Creditor's Name	Describe the action the creditor took	was taken	Amount
	Describe the action the creditor took	was taken	Amount
		was taken	Amount
Number Street			
Number Street			\$
		'	Φ
l			
City State ZIP Code	Last 4 digits of account number: XXXX–		
Within 1 year before you filed for barksunter	was any of your property in the personalism of an appire	oo for the heref	t of
creditors, a court-appointed receiver, a cust	y, was any of your property in the possession of an assign rodian, or another official?	ee for the benefi	tor
rt 5: List Certain Gifts and Contributi	ions		
Within 2 years before you filed for bankrunts	cy, did you give any gifts with a total value of more than \$6	00 per percen?	
	y, did you give any girts with a total value of more than so	oo per person?	
NoYes. Fill in the details for each gift.			
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
per person		the gifts	
			\$
Person to Whom You Gave the Gift			¥
			\$
			Ψ
Number Street			
Number Street			
City State ZIP Code			
Gity State ZIF CODE			
Person's relationship to you			
	Describe the gifts	Dates you gave	Value
Gifts with a total value of more than \$600		the gifts	
Gifts with a total value of more than \$600 per person			
			\$
per person			\$
per person			\$ \$
per person			\$ \$
per person Person to Whom You Gave the Gift			\$ \$
per person			\$ \$
per person Person to Whom You Gave the Gift Number Street			\$ \$
per person Person to Whom You Gave the Gift			\$ \$

First Name Middle Na		Case number (if known)		
	ame Last Na	me		
Within 2 years before you fi	iled for bankrupt	cy, did you give any gifts or contributions with a total valu	e of more than \$60	00 to any charity?
🖵 No				
Yes. Fill in the details for	each gift or contri	bution.		
				
Gifts or contributions to c that total more than \$600		Describe what you contributed	Date you contributed	Value
	Т		Т	
				•
Charity's Name				\$
				\$
				Φ
Number Street				
City State ZIP Co	ode			
art 6: List Certain Los	ses			
Describe the property you how the loss occurred	I lost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	Date of your loss	Value of property lost
			T	
				\$
				\$
				\$
art 7: List Certain Payn	nents or Transi	fers		\$
Within 1 year before you file	ed for bankruptc	y, did you or anyone else acting on your behalf pay or trar	nsfer any property	
Within 1 year before you file you consulted about seekir	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or trar preparing a bankruptcy petition?		
Within 1 year before you file you consulted about seekir Include any attorneys, bankru	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or trar		
Within 1 year before you file you consulted about seekir Include any attorneys, bankru	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or trar preparing a bankruptcy petition?		
Within 1 year before you file you consulted about seekir Include any attorneys, bankru	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or trar preparing a bankruptcy petition?		
 Within 1 year before you file you consulted about seekir Include any attorneys, bankru No 	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or trar preparing a bankruptcy petition?	our bankruptcy. Date payment or	
Within 1 year before you file you consulted about seekir Include any attorneys, bankru	ed for bankruptc ng bankruptcy or	y, did you or anyone else acting on your behalf pay or tran preparing a bankruptcy petition? parers, or credit counseling agencies for services required in your provides and the services required in your provides and the services are services and the services are services and the services are services a	our bankruptcy.	to anyone
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First Name Middle Name Last	Name	Case number (if known	·/	
	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				Ŷ
				\$
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You				
No Yes. Fill in the details.	Description and value of any property	transforred	Date pourset of	Amount of pay
	Description and value of any property	transferred	Date payment or transfer was made	Amount of pay
Person Who Was Paid				^
Number Street	•			\$
City State ZIP Code				\$
	business or financial affairs? nade as security (such as the granting of			
City State ZIP Code Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your nclude both outright transfers and transfers r to not include gifts and transfers that you has No	business or financial affairs? nade as security (such as the granting of	of a security interest o	or mortgage on your pro	operty).
City State ZIP Code Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your nclude both outright transfers and transfers r to not include gifts and transfers that you has No	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transf
City State ZIP Code Within 2 years before you filed for bankrup ransferred in the ordinary course of your include both outright transfers and transfers r to not include gifts and transfers that you has No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transf
City State ZIP Code Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your nclude both outright transfers and transfers r to not include gifts and transfers that you hat No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transf
City State ZIP Code Within 2 years before you filed for bankrup ransferred in the ordinary course of your nclude both outright transfers and transfers r too not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transf
City State ZIP Code Within 2 years before you filed for bankrup ransferred in the ordinary course of your nolude both outright transfers and transfers r to not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transf
City State ZIP Code Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your nclude both outright transfers and transfers r Do not include gifts and transfers that you has No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting over already listed on this statement. Description and value of property	of a security interest of Describe any prope	or mortgage on your pro	operty). Date transfe

Person's relationship to you _____

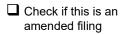
Debtor 1 First Name Middle Name		Case number (if known)			
First Name Middle Name	Last Name				
 19. Within 10 years before you filed for baars are a beneficiary? (These are often cal No 		ty to a self-settled trust	or similar device of w	hich you	
Yes. Fill in the details.					
	Description and value of the prope	erty transferred		Date transfer was made	
Name of trust					
Part 8: List Certain Financial Acco	ounts, Instruments, Safe Deposit	Boxes, and Storage	• Units		
	kruptcy, were any financial accounts o arket, or other financial accounts; cert poperatives, associations, and other fi	ificates of deposit; sha			
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
Name of Financial Institution	XXXX	Checking		\$	
Number Street		Savings			
City State ZIP Co	de	Brokerage			
Name of Financial Institution	XXXX	Checking		\$	
Number Street		 Money market Brokerage Other 			
City State ZIP Co	de				
 21. Do you now have, or did you have wir securities, cash, or other valuables? No Yes. Fill in the details. 	thin 1 year before you filed for bankru	otcy, any safe deposit b	oox or other depository	/ for	
	Who else had access to it?	Describe the	contents	Do you still have it?	
Name of Financial Institution	Name			No Yes	
Number Street	Number Street				
City State ZIP Co	City State ZIP Code				

First Name			Cas	e number (if known)	
	Middle Name La	st Name			
Have you stored prope	erty in a storage unit	t or place other than your home	within 1 vear	before you filed for bankr	uptcv?
Yes. Fill in the deta	ails.				
		Who else has or had access to	it?	Describe the contents	Do you stil have it?
Name of Starson Fasi	114	Nama			
Name of Storage Facil	iity	Name			C Yes
Number Street		Number Street			
		City State ZIP Code			
City	State ZIP Code				
irt 9: Identify P	roperty You Hold	or Control for Someone Els	se		
Do you hold or contro	ol any property that	someone else owns? Include a	ny property v	ou borrowed from, are sto	ring for.
or hold in trust for so			.,		
Yes. Fill in the det	tails.				
		Where is the property?		Describe the property	Value
Owner's Name					\$
		Number Officer			*
Number Street		Number Street			
		City State	ZIP Code		
City	State ZIP Code	City State	ZIP Code		
-		City State	ZIP Code		
rt 10: Give Deta	ils About Environ	mental Information	ZIP Code		
	ils About Environ	mental Information	ZIP Code		
rt 10: Give Deta r the purpose of Part 1 Environmental law mo	IIS About Environ 10, the following def eans any federal, st	mental Information initions apply: ate, or local statute or regulation	n concerning		
rt 10: Give Deta r the purpose of Part 1 Environmental law mo hazardous or toxic su	ills About Environ 10, the following def eans any federal, st ubstances, wastes, o	imental Information initions apply: ate, or local statute or regulation or material into the air, land, soi	n concerning I, surface wat	er, groundwater, or other	
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btor 1 First Name Middle Name	Last Name	Case number (if known)	
First Name Middle Name	Last name		
5. Have you notified any governmental	l unit of any release of hazardous n	naterial?	
	-		
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site			
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Co	ade	
City State ZIP	Code		
6. Have you been a party in any judicia	al or administrative proceeding und	er any environmental law? Include settlemen	ts and orders.
🔲 No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
	court of agency		case
Case title			
	Court Name		Pending
			On appeal
	Number Street		Concluded
Case number	City State	ZIP Code	
art 11: Give Details About Yo	ur Business or Connections to	Any Business	
		s or have any of the following connections to	any business?
	ty company (LLC) or limited liability	her activity, either full-time or part-time	
A partner in a partnership	ty company (LEC) or innited habinty	partnersnip (LLP)	
An officer, director, or mana			
An owner of at least 5% of the	ne voting or equity securities of a co	orporation	
No. None of the above applies.	Go to Part 12.		
Yes. Check all that apply above		h business.	
	Describe the nature of the b		number
			Security number or ITIN.
Business Name			
		EIN: –	
Number Street			
	Name of accountant or book	keeper Dates business exister	b
		From To)
City State ZIP	Code		
	Describe the nature of the b	· · · · · · · · · · · · · · · · · · ·	
Business Name		Do not include Social S	Security number or ITIN.
Number Street		EIN:	
Number Street	Name of accountant or book	keeper Dates business existed	d
		From To	
City State ZIP	Code		·

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
Business Name		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP	' Code	From To
thin 2 years before you filed for stitutions, creditors, or other par No Yes. Fill in the details below.	bankruptcy, did you give a financial statement to a ties.	nyone about your business? Include all financial
	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP	Code	
12: Sign Below		
	tatement of Financial Affairs and any attachments, nderstand that making a false statement, concealing case can result in fines up to \$250,000, or imprison	g property, or obtaining money or property by frau
nswers are true and correct. I un n connection with a bankruptcy o 8 U.S.C. §§ 152, 1341, 1519, and	3571.	
nswers are true and correct. I un n connection with a bankruptcy o		
nswers are true and correct. I un n connection with a bankruptcy o 8 U.S.C. §§ 152, 1341, 1519, and	3571. X	
nswers are true and correct. I un n connection with a bankruptcy of 8 U.S.C. §§ 152, 1341, 1519, and Contemporaries of the second secon	3571. Signature of Debtor 2 Date	
nswers are true and correct. I un n connection with a bankruptcy of 8 U.S.C. §§ 152, 1341, 1519, and Contemporaries of the second secon	3571. Signature of Debtor 2	
nswers are true and correct. I un n connection with a bankruptcy of 8 U.S.C. §§ 152, 1341, 1519, and Signature of Debtor 1 Date Did you attach additional pages to No Yes	3571. Signature of Debtor 2 Date	's Filing for Bankruptcy (Official Form 107)?
nswers are true and correct. I un n connection with a bankruptcy of 8 U.S.C. §§ 152, 1341, 1519, and Signature of Debtor 1 Date No	3571. Signature of Debtor 2 Date O Your Statement of Financial Affairs for Individual eone who is not an attorney to help you fill out bank	's Filing for Bankruptcy (Official Form 107)?

Fill in this inf	ormation to identify you	ur case:	
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	District of	
Case number (If known)			



Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: C information below. 	reditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Surrender the property.Retain the property and redeem it.	□ No □ Yes
Description of property securing debt:	 Retain the property and enter into a Reaffirmation Agreement. 	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	D No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	Surrender the property.	D No
Description of	Retain the property and redeem it.	C Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	Surrender the property.	D No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
5	Retain the property and [explain]:	
	76	

First Name

Middle Name

Last Name

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
	No No
Description of leased property:	Yes
	No No
Description of leased property:	Yes
Lessor's name:	🗖 No
Description of leased property:	Yes
	No Yes
Description of leased property:	
	No
Description of leased property:	Yes
	No No
Description of leased property:	Yes
	No
Description of leased property:	Yes

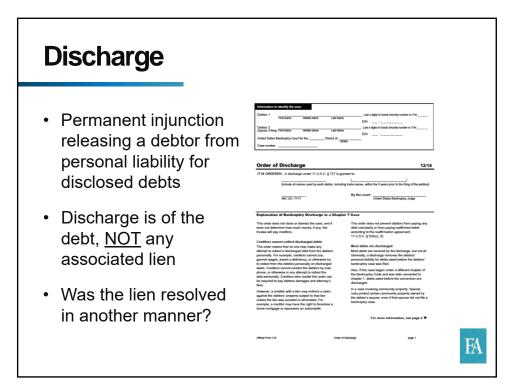
Part 3:

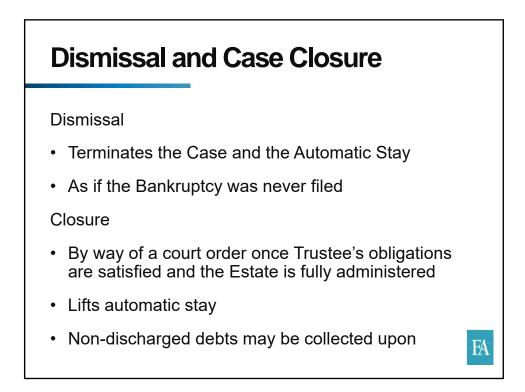
Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

	×
Signature of Debtor 1	Signature of Debtor 2
Date	Date

77 Statement of Intention for Individuals Filing Under Chapter 7



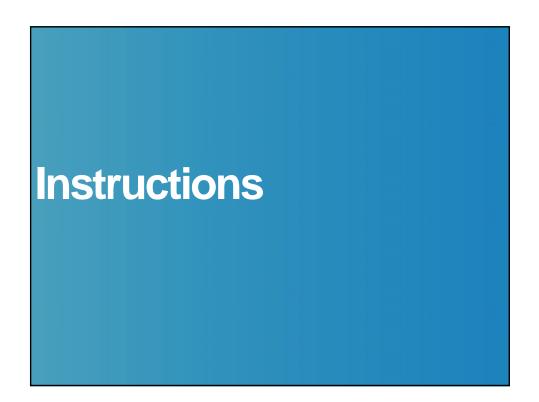


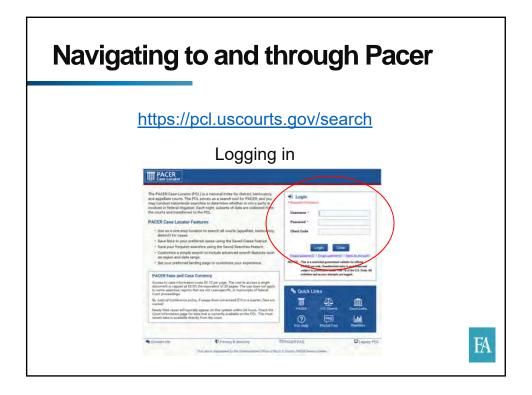
More Terms

- Automatic Stay
- 341 Meeting of Creditors
- Plan
- Abandonment
 - Actual
 - Constructive

- Claw-back/look-back
 Period
- · Meeting of Creditors
- Automatic Stay
- Appeals Period

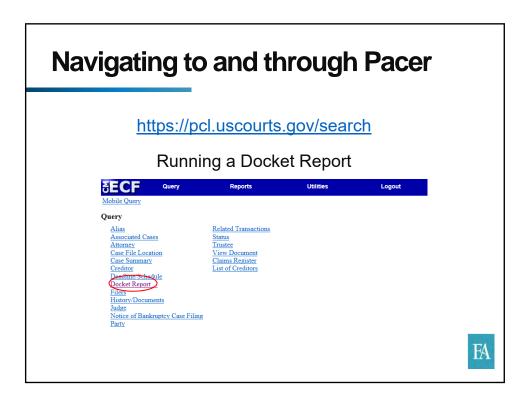
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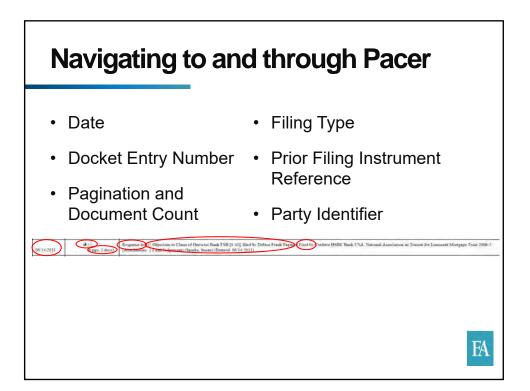
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Type of I	BK filing	U.S. Bankruptey Court Middle District of Florida (Tampa) Bankruptey Petition #: 8:14-bk-06172-CPM
igned to: Catherine apter 7 heater set ints Register	Peek McEwen	Debtar discharged: 0 Joint debtor discharged: 0 341 meeting: 0 Deadline for filmy claims: 1 Deadline for shirenge o
C.S. Trustee United States Truste Timberlake Annex, Su 501 E Polk Street Tampa, FL 33602 \$13-225-2000		
United States Truste Timberlake Annex, Su 501 E Polk Street Tampa, FL 33602		Docket Text
United States Truste Timberlake Annex, Su 501 E Polle Street Tampa, FL 33602 813-228-2000	ite 1200	
United States Truste Timbertake Annex, Su 501 E Polk Street Tampa, FL 38602 813-228-2000 Filing Date	# 1200	Docket Text Voluatary Petition under Chapter 7 (Fee Paid.). Schedules. A.J and Summary of Schedules. Statement of Francis Athäris. Statement of Internitions. Disclorate of Compression. Statement of Income and Means Text Calculation. F
United States Truste Trabelake Annex, Su 501 E Polk Street Tampa, FL 33602 813-228-2000 Filing Date 05/29/2014	# 	Docket Text Voluntary Potition under Chapter 7 (Fee Paid.). Schedules A-J and Summary of Schedules. Statement of Financia Addiari. Statement of Iterations. Disclosure of Compensation. Statement of Income and Means Text Calculation. F by Krenteh Kace on behalf of Human A. Viries S., Belty A. Viries. (Cast., Kenteh) (Entered 05/202014) Statement of Debtors Social Security Numbers Filed by Kenteth Case on behalf of Joint Debtor Berty A. Virica.

SECF	Query Rep	orts Utilities Logout	
Joint Debtor Betty A. Verica 7135 Kensington O University Park, FI MANATEE-FL SSN / ITIN: xxx-x	34201	represented by Veronica Adams Coulte (See above for address)	
Trustee Nicole M Camero Nicole M Camero 235 Apollo Beach Apollo Beach, FL 813-645-8787 U.S. Trustee United States Tru	s, P.A. Boulevard, #231 13572 stee - TPA7/13	represented by Nicole M Cameron, Att Nicole M. Cameron, P. A. 235 Apollo Beach Boulev Apolo Beach, FL 13572 813-645-8787 Fax: 866-674-0164 Email <u>truster@linegolary</u>	and, #231
Timberlake Annex, 501 E Polk Street	Suite 1200	Docket Entry Information	
Tampa, FL 33602 813-228-2000		· · · · · · · · · · · · · · · · · · ·	
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SI3-228-2000 Filing Date Volum Disck	sure of Compensation	apter 7. (Fee Paid.). Schedules A-J and Summary of Schedules. Statement of Financial 1. Statement of Income and Meaus Test Calculation. Filed by Kenneth Case on behalf of	f Thomas A. Verica Sr
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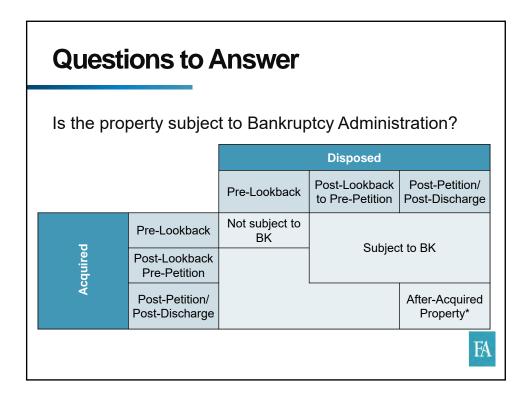


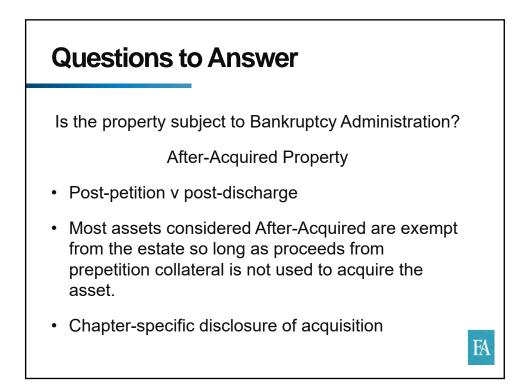
Call me Ishmael...

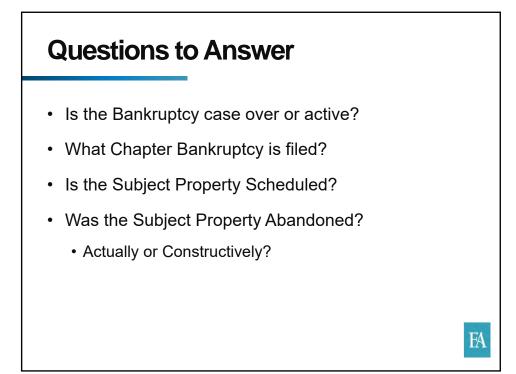
Reviewing the Docket and Summary

- Petition/Schedules/Notices of Intent;
- Creditor/Trustee Objections;
- · Any instrument dealing with the subject property;
- Any instrument dealing with an "interested" or secured creditor;
- The occurrence of the meeting of creditors;
- Any applicable plan;
- Dismissals;
- · Discharge; and
- Trustee Final Reports

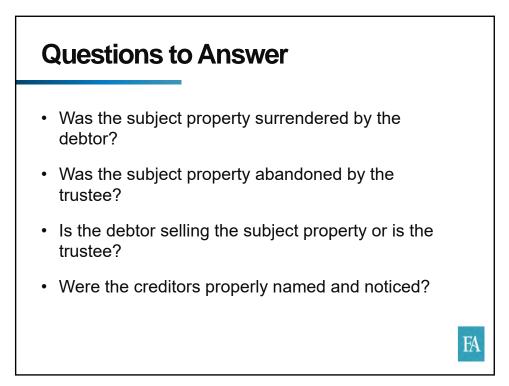
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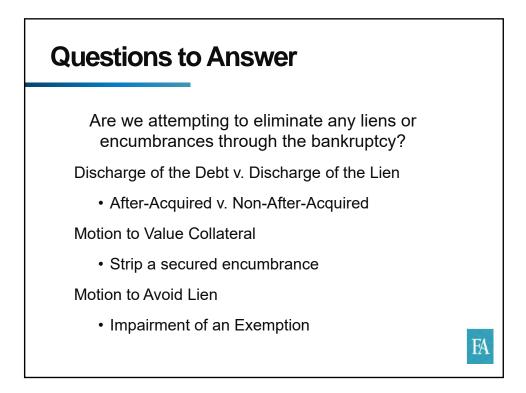


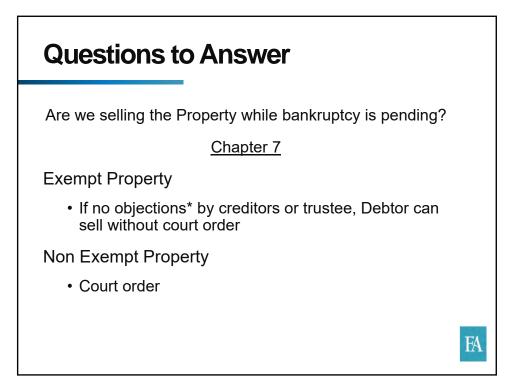


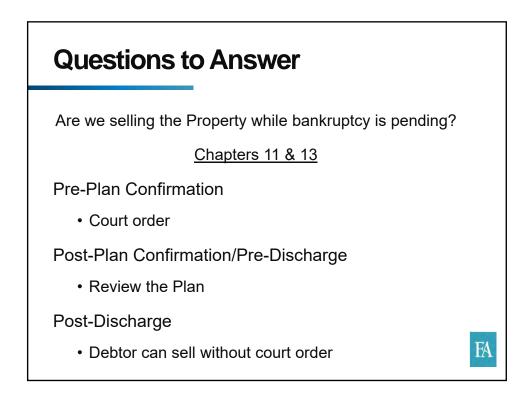


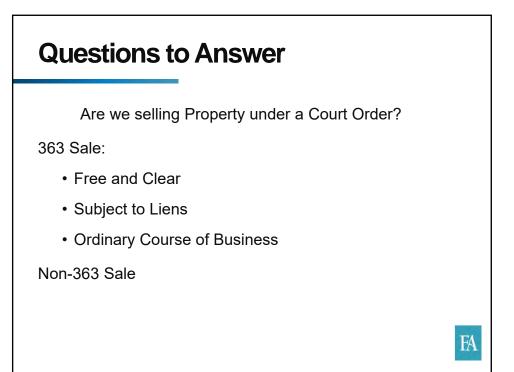
stions to A	nswer		
	المعادية بالمعالمة	-	
s the Subject P	roperty listed	as E	xempt
Ture Thomas A. Verica, Sr.		ave No.	
Betty A. Verica		ase No.	
SCHEDULE O	Debtory - PROPERTY CLAIMED AS E	XEMPT	
Debus clause the exemptions to which debus to entitled (Check one box) □ 11 (J.S.C. (322(b)(2)) ■ 11 (J.S.C. (322(b)(2))	\$155,675, 1 kineset in	frank de entitezement oan dit	napion that intends 11 out out that man out of a the states of the sources
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Improved Real Property - Debtor's Homestead Location: 7135 Kensington CL, University Park FL 34201	Fia. Const. art. X, § 4(a)(1); Fia. Stat. Ann. §§ 222.01 & 222.02	<u>o</u> pe	228,676,00
Checking, Savings, or Other Financial Accounts, Personal Savings Account - Institution; Bank of America Acct, No.::::::::::::::::::::::::::::::::::::	Certificates of Decost Fia. Stat. Ann. § 222.201; 11 U.S.C. § S22(d)(10)(A)	100%	300,00
Household Goods and Furnishings Household Goods & Furnishings Living/Family Room (soft, amnchar, loveseat, coffee table, end table, lamps, credenze, tv, sofa bed, bookcase) Location; 7155 Kensington CL, University Park FL 54201	Fia. Const. art X, § 4(a)(2)	250.00	250.00
Household Goods & Furnishings - KitchemDining Room (table, chairs, dishes, buffet, china cabinet) Location; 7135 Kensington Ct., University Park FL 34201	Fia. Const. art X. § 4(a)(2)	100.00	100.00
Household Goods & Furnishings -	Fla. Const. art. X. § 4(a)(2)	35.00	35.00

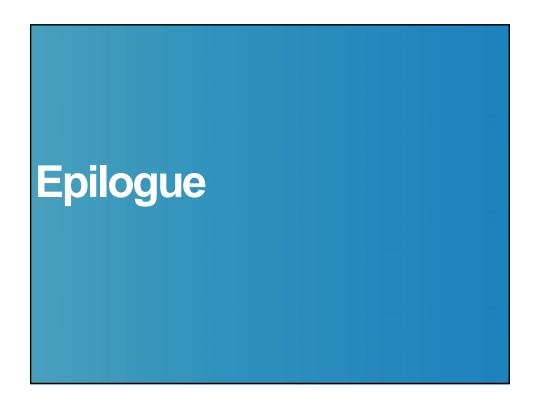






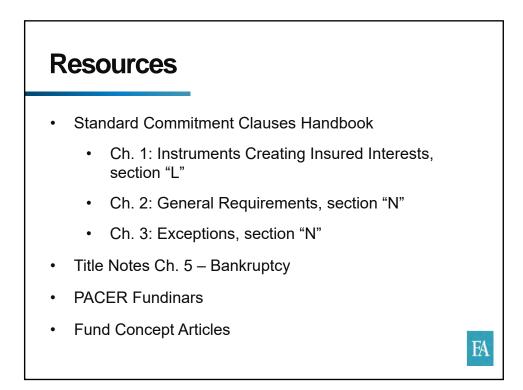






Getting to Closing

- Review BK Case
- Proper Commitment Clauses
- Obtain Affidavits
- Record Certified Court Orders
- Deeds executed by proper Parties
- Proper Disbursement



FA

BANKRUPTCY EXAMINATION PARADIGM

