| B1 (Official Form 1)(4/10)   |  |   |                                   |   |  |                  |  |                             |
|--|--|---|-----------------------------------|---|--|------------------|--|-----------------------------|
|  | States Bank<br>ddle District o   |   |                                   |   |  |                  | Voluntary  | Petition                    |
| Name of Debtor (if individual, enter Last, First <b>Dr. Jeffrey M. Bern, P.C.</b>  | Name   | of Joint De   | ebtor (Spouse                     | (Last, First,                           | Middle):                                   |                  |  |                             |
| All Other Names used by the Debtor in the last (include married, maiden, and trade names):   |  |   |                                   | Joint Debtor in trade names):           | n the last 8 years                         |                  |  |                             |
| Last four digits of Soc. Sec. or Individual-Taxp (if more than one, state all) 63-1067146  | ayer I.D. (ITIN) No.   | /Complete EIN   |                                   | our digits of than one, state           |  | Individual-Ta    | axpayer I.D. (ITIN) No   | o./Complete EIN             |
| Street Address of Debtor (No. and Street, City,<br>1760 Platt Place<br>Montgomery, AL  | and State):  | ZIP Code  | Street                            | Address of                              | Joint Debtor                               | (No. and Stre    | eet, City, and State):   | ZIP Code                    |
|  | Г  | 36117   | -                                 |   |  |                  |  | ZIP Code                    |
| County of Residence or of the Principal Place of Montgomery  | of Business:   | 30117   | Count                             | y of Reside                             | nce or of the                              | Principal Plac   | ce of Business:  |                             |
| Mailing Address of Debtor (if different from str   | reet address):   |   | Mailir                            | g Address                               | of Joint Debt                              | or (if differen  | t from street address):  |                             |
| Additional of Decici (in different from Su   | cet address).  |   | 1,24,111                          | .g r raaress                            | 01 <b>00 m</b> t <b>2 0</b> 0 t            | or (ir dirioron  | i nom succe acaress).  |                             |
|  | г  | ZIP Code  |                                   |   |  |                  |  | ZIP Code                    |
| Location of Principal Assets of Business Debto (if different from street address above):   | r  |   | •                                 |   |  |                  |  |                             |
| Type of Debtor   | Nature   | of Business   |                                   |   | Chapter                                    | of Bankrupt      | tcy Code Under Whic  | h                           |
| (Form of Organization)   | (Chec  | ck one box)   |                                   |   | the I                                      | Petition is Filo | ed (Check one box)   |                             |
| (Check one box)  ☐ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership   | <ul> <li>Health Care Business</li> <li>Single Asset Real Estate as defir in 11 U.S.C. § 101 (51B)</li> <li>Railroad</li> <li>Stockbroker</li> <li>Commodity Broker</li> <li>Clearing Bank</li> </ul> |   | efined                            | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt | er 9<br>er 11<br>er 12                     | of a<br>□ Cha    | apter 15 Petition for Ro<br>a Foreign Main Procee<br>apter 15 Petition for Ro<br>a Foreign Nonmain Pro | ding<br>ecognition          |
| Other (If debtor is not one of the above entities,<br>check this box and state type of entity below.)  | Other  |   |                                   |   |  |                  | of Debts<br>one box)   |                             |
| P.C.   | (Check be<br>Debtor is a tax<br>under Title 26   | empt Entity ox, if applicable) x-exempt organ of the United crnal Revenue ( | States                            | defined<br>"incurr                      | •  | onsumer debts,   | Debts busines  | are primarily<br>ess debts. |
| Filing Fee (Check one bo   | x)   | Check on  | e box:                            |   | Chap                                       | ter 11 Debto     | rs   |                             |
| ■ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to attach signed application for the court's considera debtor is unable to pay fee except in installments.  | btor is not<br>btor's aggi   | a small busin   | ness debtor as d                  | ated debts (excl                        | S.C. § 101(51D). uding debts owed to insid |                  |  |                             |
| Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's considera   | applicable<br>olan is bein<br>ceptances  | e boxes:<br>ng filed with<br>of the plan w                                  | this petition.                    | v                                       | on 4/01/13 and every three                 |                  |  |                             |
| Statistical/Administrative Information  Debtor estimates that funds will be available Debtor estimates that, after any exempt properties will be no funds available for distributions.   | perty is excluded and  | d administrativ   |                                   | es paid,                                |  | THIS             | SPACE IS FOR COURT   | USE ONLY                    |
| Estimated Number of Creditors  | ion to unscented ere   | - dittors.  |                                   |   |  | 1                |  |                             |
| 1- 50- 100- 200-<br>49 99 199 999  | 1,000-<br>5,000 5,001-<br>10,000   | 10,001- 2   | 35,001-<br>60,000                 | 50,001-<br>100,000                      | OVER<br>100,000                            |                  |  |                             |
| Estimated Assets  Solution  Solution | \$1,000,001 \$10,000,00 to \$10 to \$50 million  | 1 \$50,000,001 \$<br>to \$100 to  | 100,000,001<br>0 \$500<br>nillion | \$500,000,001<br>to \$1 billion         | More than \$1 billion                      |                  |  |                             |
| Estimated Liabilities  | \$1,000,001 \$10,000,00<br>to \$10 to \$50<br>pillion million  | 1 \$50,000,001 \$   | 100,000,001<br>5 \$500<br>oillion | \$500,000,001<br>to \$1 billion         | More than \$1 billion                      |                  | O D M '  | _                           |

| B1 (Official For                           | rm 1)(4/10)  |   | Page 2   |
|--|--|---|--|
| Voluntar                                   | y Petition   | Name of Debtor(s):  Dr. Jeffrey M. Bern,  | D.C.   |
| (This page mi                              | ust be completed and filed in every case)  | Dr. Jenrey W. Bern,   | F.G.   |
| ( F G                                      | All Prior Bankruptcy Cases Filed Within Las  | t 8 Years (If more than two   | , attach additional sheet)   |
| Location<br>Where Filed:                   | - ·  | Case Number:  | Date Filed:  |
| Location<br>Where Filed:                   |  | Case Number:  | Date Filed:  |
| Pe   | ending Bankruptcy Case Filed by any Spouse, Partner, or  | Affiliate of this Debtor (In  | more than one, attach additional sheet)                              |
| Name of Debt<br>- None -                   | tor:   | Case Number:  | Date Filed:  |
| District:                                  |  | Relationship:   | Judge:   |
| forms 10K a<br>pursuant to<br>and is reque | Exhibit A  pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)  A is attached and made a part of this petition. | I, the attorney for the petition have informed the petition 12, or 13 of title 11, United |  |
|  | Exhor own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.   | pose a threat of imminent and   | identifiable harm to public health or safety?                        |
| ☐ Exhibit If this is a jo                  | eleted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made   | a part of this petition.  |  |
|  | Information Regardin   | ng the Debtor - Venue   |  |
| -  | (Check any ap<br>Debtor has been domiciled or has had a residence, princip<br>days immediately preceding the date of this petition or for  | al place of business, or prin   |  |
|  | There is a bankruptcy case concerning debtor's affiliate, g  | eneral partner, or partnershi   | p pending in this District.  |
|  | Debtor is a debtor in a foreign proceeding and has its printhis District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.   | s in the United States but is<br>the interests of the parties w                           | a defendant in an action or<br>Ill be served in regard to the relief |
|  | Certification by a Debtor Who Reside<br>(Check all app   |   | ial Property   |
|  | Landlord has a judgment against the debtor for possession  |   | ox checked, complete the following.)                                 |
|  | (Name of landlord that obtained judgment)  |   |  |
|  | (Address of landlord)  |   |  |
|  | Debtor claims that under applicable nonbankruptcy law, the   |   |  |
|  | the entire monetary default that gave rise to the judgment.  Debtor has included in this petition the deposit with the coafter the filing of the petition.   |   | •  |
|  | Debtor certifies that he/she has served the Landlord with t  | his certification. (11 U.S.C.   | § 362(l)).<br>1 14:14:50 Desc Main                                   |

B1 (Official Form 1)(4/10)

## **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] 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.

 $\mathbf{X}$ 

Signature of Debtor

 $\mathbf{X}$  .

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Michael A. Fritz, Sr

Signature of Attorney for Debtor(s)

#### Michael A. Fritz, Sr ASB 5814 Z56M

Printed Name of Attorney for Debtor(s)

#### Fritz Hughes & Hill, LLC

Firm Name

7020 Fain Park Drive Suite 1 Montgomery, AL 36117

Address

## Email: bankruptcy@fritzandhughes.com (334) 215-4422 Fax: (334) 215-4424

Telephone Number

### March 29, 2011

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Dr. Jeffrey Bern

Signature of Authorized Individual

#### Dr. Jeffrey Bern

Printed Name of Authorized Individual

#### President

Title of Authorized Individual

#### March 29, 2011

Date

## se 11-30785 Dec 1 Filed 03/29/1

| Signature | of a | Foreign    | Represer   | itative |
|-----------|------|------------|------------|---------|
| Signature | or a | I OI CIZII | IXCDI CSCI | ııauvc  |

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Dr. Jeffrey M. Bern, P.C.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| ₹ | ~ |  |
|---|---|--|
|   |   |  |

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

## United States Bankruptcy Court Middle District of Alabama

| In re | Dr. Jeffrey M. Bern, P.C. | P.C.      |         |    |
|-------|---------------------------|-----------|---------|----|
|       |                           | Debtor(s) | Chapter | 11 |

#### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

| (1)  | (2)   | (3)   | (4)   | (5)  |
|--|---|---|---|--|
| Name of creditor and complete<br>mailing address including zip<br>code             | Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.) | Indicate if claim is contingent, unliquidated, disputed, or subject to setoff | Amount of claim [if secured, also state value of security] |
| Alabama Office Supply  | Alabama Office Supply   |   |   | 404.00   |
| Alexander Dental Lab<br>160 S. Panama Street<br>Montgomery, AL 36107               | Alexander Dental Lab<br>160 S. Panama Street<br>Montgomery, AL 36107  |   |   | 1,260.00   |
| AT&T<br>POB 105024<br>Atlanta, GA 30348-5024                                       | AT&T<br>POB 105024<br>Atlanta, GA 30348-5024  |   |   | 7,303.00   |
| Benco Dental<br>295 Centerpoint Blvd<br>POB 491<br>Pittston, PA 18640              | Benco Dental<br>295 Centerpoint Blvd<br>POB 491<br>Pittston, PA 18640   |   |   | 15,821.00  |
| Culligan<br>P.O. Box 4977<br>Montgomery, AL 36103                                  | Culligan<br>P.O. Box 4977<br>Montgomery, AL 36103   |   |   | 240.00   |
| Dental Ceramics<br>1513 Rex Street<br>Montgomery, AL 36107                         | Dental Ceramics<br>1513 Rex Street<br>Montgomery, AL 36107  |   |   | 14,000.00  |
| Edwards Heating A/C<br>1540 Jean Street<br>Montgomery, AL 36107                    | Edwards Heating A/C<br>1540 Jean Street<br>Montgomery, AL 36107   |   |   | 615.00   |
| Jackson Thornton<br>P.O. Box 96<br>Montgomery, AL 36101                            | Jackson Thornton<br>P.O. Box 96<br>Montgomery, AL 36101   | Alan Grigsby  |   | 8,500.00   |
| Jeffery Bern<br>1760 Platt Place<br>Montgomery, AL 36117                           | Jeffery Bern<br>1760 Platt Place<br>Montgomery, AL 36117  |   |   | 40,000.00  |
| Montgomery County Revenue<br>Commissioner<br>P.O. Box 1667<br>Montgomery, AL 36102 | Montgomery County Revenue<br>Commissioner<br>P.O. Box 1667<br>Montgomery, AL 36102  | Property Taxes  |   | 6,000.00   |
| Office Depot<br>POB 689020<br>Des Moines, IA 50368                                 | Office Depot<br>POB 689020<br>Des Moines, IA 50368  |   |   | 178.00   |

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Best Case Bankruptcy

| B4 (Offi | cial Form 4) (12/07) - Cont. |
|----------|------------------------------|
| In re    | Dr. Jeffrev M. Bern. P.C.    |

Debtor(s)

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

| (1)   | (2)   | (3)   | (4)   | (5)  |
|---|---|---|---|--|
| Name of creditor and complete<br>mailing address including zip<br>code            | Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.) | Indicate if claim is contingent, unliquidated, disputed, or subject to setoff | Amount of claim [if secured, also state value of security] |
| Patterson Financial Services<br>1031 Mendota Heights Road<br>Saint Paul, MN 55120 | Patterson Financial Services<br>1031 Mendota Heights Road<br>Saint Paul, MN 55120   |   |   | 3,565.00   |
| Patterson Financial Services<br>1031 Mendota Heights Road<br>Saint Paul, MN 55120 | Patterson Financial Services<br>1031 Mendota Heights Road<br>Saint Paul, MN 55120   |   |   | 16,866.00  |
| RBC Bank<br>POB 1070<br>Charlotte, NC 28201                                       | RBC Bank<br>POB 1070<br>Charlotte, NC 28201   |   |   | 11,127.00  |
| Sterling Bank<br>POB 2181<br>Columbus, GA 31902-2181                              | Sterling Bank POB 2181 Columbus, GA 31902-2181  |   |   | 10,838.00  |
| Sterling Bank<br>POB 2181<br>Columbus, GA 31902-2181                              | Sterling Bank POB 2181 Columbus, GA 31902-2181  |   |   | 5,000.00   |
|   |   |   |   |  |
|   |   |   |   |  |
|   |   |   |   |  |

# DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the President of the P.C. named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

| Date | March 29, 2011 | Signature | /s/ Dr. Jeffrey Bern |
|------|----------------|-----------|----------------------|
|      |                |           | Dr. Jeffrey Bern     |
|      |                |           | President            |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Best Case Bankruptcy

## United States Bankruptcy Court Middle District of Alabama

|      | Wilder  | District of Alabama  | •  |                                       |
|------|---|--|--|---------------------------------------|
| In   | re Dr. Jeffrey M. Bern, P.C.  |  | Case No.                                   |                                       |
|      |   | Debtor(s)  | Chapter                                    |                                       |
|      | DISCLOSURE OF COMPENS.  | ATION OF ATTO  | RNEY FOR DI                                | EBTOR(S)                              |
|      |   |  |  | . ,                                   |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2 compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or   | of the petition in bankrupto   | y, or agreed to be pa                      | id to me, for services rendered or to |
|      | For legal services, I have agreed to accept   |  | \$ <u></u>                                 | 10,000.00                             |
|      | Prior to the filing of this statement I have received   |  | \$   | 10,000.00                             |
|      | Balance Due   |  | \$ <u></u>                                 | 0.00                                  |
| 2.   | The source of the compensation paid to me was:  |  |  |                                       |
|      | ■ Debtor □ Other (specify):   |  |  |                                       |
| 3.   | The source of compensation to be paid to me is:   |  |  |                                       |
|      | ☐ Debtor ☐ Other (specify): \$10,000 R  | Retainer   |  |                                       |
| 4.   | ■ I have not agreed to share the above-disclosed compensation   | ation with any other person  | unless they are mem                        | bers and associates of my law firm.   |
|      | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names  |  |  |                                       |
| 5.   | In return for the above-disclosed fee, I have agreed to rende   | r legal service for all aspec  | ts of the bankruptcy                       | case, including:                      |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, stateme</li> <li>c. Representation of the debtor at the meeting of creditors at</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to redure affirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on house</li> </ul> | nt of affairs and plan which<br>and confirmation hearing, a<br>uce to market value; ex<br>as needed; preparation | h may be required;<br>nd any adjourned hea | arings thereof;                       |
| 5.   | By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any dischange any other adversary proceeding.  |  |  | es, relief from stay actions or       |
|      | C   | CERTIFICATION  |  |                                       |
| this | I certify that the foregoing is a complete statement of any ag bankruptcy proceeding.   | reement or arrangement for   | payment to me for r                        | epresentation of the debtor(s) in     |
| Dat  | ed: March 29, 2011  | /s/ Michael A. Fri   | itz, Sr                                    |                                       |
|      |   | Michael A. Fritz,  |  |                                       |
|      |   | Fritz Hughes & F<br>7020 Fain Park D   |  |                                       |
|      |   | Suite 1  |  |                                       |
|      |   | Montgomery, AL   |  | 4                                     |
|      |   |  | Fax: (334) 215-442                         | 4                                     |

Dr. Jeffrey M. Bern, P.C. 1760 Platt Place Montgomery, AL 36117

**ABS** 

Alabama Office Supply

Alexander Dental Lab 160 S. Panama Street Montgomery, AL 36107

AT&T POB 105024 Atlanta, GA 30348-5024

Benco Dental 295 Centerpoint Blvd POB 491 Pittston, PA 18640

Carolyn Bern 3400 Summerhill Drive Montgomery, AL 36111

CIT 1 CIT Drive, Suite 4321 Livingston, NJ 07039

Culligan P.O. Box 4977 Montgomery, AL 36103 Dental Ceramics 1513 Rex Street Montgomery, AL 36107

Edwards Heating A/C 1540 Jean Street Montgomery, AL 36107

GE Healthcare Financial POB 414418 Boston, MA 02241

Hartford Life Insurance

IRS 801 Tom Martin Drive Birmingham, AL 35211

IRS c/o Patricia Conover P.O. Box 197 Montgomery, AL 36101

Jackson Thornton P.O. Box 96 Montgomery, AL 36101

Jeffery Bern 1760 Platt Place Montgomery, AL 36117

Jeffrey M. Bern

Montgomery County Revenue Commissioner P.O. Box 1667 Montgomery, AL 36102

Office Depot POB 689020 Des Moines, IA 50368

Patterson Financial Services 1031 Mendota Heights Road Saint Paul, MN 55120

Pitney Bowes

RBC Bank POB 1070 Charlotte, NC 28201

Sterling Bank POB 2181 Columbus, GA 31902-2181