B1 (Official Form 1)(4	4/10)										
		United S Mic		Bankrustrict of A						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Middle): Irwin, Michael D.				Name	of Joint De	ebtor (Spouse	e) (Last, First,	Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
Last four digits of Soc (if more than one, state all)	. Sec. or Indi	ividual-Taxpa	yer I.D. (I	TIN) No./Co	mplete EI	N Last for	our digits o	f Soc. Sec. or	r Individual-T	axpayer I.D. (ITIN) N	o./Complete EIN
Street Address of Deb 8672 Lillian Plac Montgomery, AL	е	Street, City, a	and State):		7ID C- 1-	Street	Address of	Joint Debtor	(No. and Str	eet, City, and State):	ZID Co. I.
				36	ZIP Code 3117						ZIP Code
County of Residence of Montgomery	or of the Prin	cipal Place of	Business:	1 30	7117	Count	y of Reside	ence or of the	Principal Pla	ce of Business:	
Mailing Address of D	ebtor (if diffe	erent from stre	eet address):		Mailir	g Address	of Joint Debt	tor (if differen	t from street address)	
					ZIP Code						ZIP Code
Location of Principal (if different from stree	Assets of Buset address abo	siness Debtor ove):									
Type	of Debtor			Nature of	Business			Chapter	of Bankrup	tcy Code Under Whi	ch
(Form of Organization) (Check one box) ☐ Health Care ☐ Single Asse in 11 U.S.C See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership. ☐ Commodity				defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Ch of ☐ Ch	ed (Check one box) apter 15 Petition for F a Foreign Main Proce apter 15 Petition for F a Foreign Nonmain P	eding Recognition		
Other (If debtor is not one of the above entities, check this box and state type of entity below.)			☐ Other Tax-Exempt Entity (Check box, if applicable) ☐ Debtor is a tax-exempt organiz under Title 26 of the United St Code (the Internal Revenue Co		nization States	defined	l in 11 U.S.C. and individual to the line of the line	(Check onsumer debts,	busin	s are primarily ness debts.	
Full Filing Fee attach Filing Fee to be paid attach signed applica debtor is unable to p. Form 3A. Filing Fee waiver recattach signed applica	in installments tion for the cor ay fee except in	urt's considerati n installments. I able to chapter	individuals on certifying Rule 1006(b 7 individual	g that the). See Official s only). Must	Check if D ar Check a A A	ebtor is a si lebtor is not f: lebtor's aggi re less than i ill applicable plan is bein cceptances	a small busing regate nonco \$2,343,300 (as boxes: ag filed with of the plan w	debtor as definess debtor as on thingent liquid amount subject this petition.	ated debts (excited to adjustment		ee years thereafter).
Statistical/Administr ■ Debtor estimates t □ Debtor estimates t there will be no fu	hat funds wil hat, after any	l be available exempt prop	for distrib	luded and ad	ecured cree Iministrativ	ditors.			THIS	SPACE IS FOR COURT	USE ONLY
Estimated Number of 1- 50- 49 99	Creditors 100- 199	200-	1,000- 5,000	5,001-	10,001-	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50	550,000,001 o \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities	\$100,001 to \$500,000 3C 11-8	to \$1	\$1,000,001 to \$10	\$10,000,001 Sto \$50 tt	550,000,001 o \$100 PO 4/1	to \$500 million		\$1 billion 38/04/1	1-09:03:4	19 Desc Ma	in
				Doc	ument	t Pa	age 1 o	t 9			

B1 (Official Form 1)(4/10) Page 2

Voluntary		Name of Debtor(s): Irwin, Michael D.		
(This page mus	st be completed and filed in every case)	irwin, Michael D.		
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad	ditional sheet)	
Location Where Filed:	- None -	Case Number:	Date Filed:	
Location Where Filed:		Case Number:	Date Filed:	
Per	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)	
Name of Debto - None -	or:	Case Number:	Date Filed:	
District:		Relationship:	Judge:	
	Exhibit A		hibit B whose debts are primarily consumer debts.)	
forms 10K ar pursuant to S and is reques	leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission lection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X /s/ Daniel Gary Hamm August 4, 2011		
		Signature of Attorney for Debtor(s) Daniel Gary Hamm ASB-99	(Date)	
	Fyh	l ibit C		
	r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.		harm to public health or safety?	
	Exh	ibit D		
_	eted by every individual debtor. If a joint petition is filed, ea	_	separate Exhibit D.)	
	D completed and signed by the debtor is attached and made	a part of this petition.		
If this is a join	nt pennon: D also completed and signed by the joint debtor is attached a	and made a part of this petition.		
	Information Regardin (Check any ap	_		
	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principal asset		
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnership pending	in this District.	
	Debtor is a debtor in a foreign proceeding and has its princ this 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.	in the United States but is a defendar ne interests of the parties will be serve	nt in an action or d in regard to the relief	
	Certification by a Debtor Who Reside (Check all app		ty	
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked,	complete the following.)	
	(Name of landlord that obtained judgment)	<u> </u>		
	(Address of landlord)			
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f			
	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 the Case 11-81167 Doc 1 Filed 08/04/11		2:40 Dose Main	

B1 (Official Form 1)(4/10)

Page 3

(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.

X /s/ Michael D. Irwin

Signature of Debtor Michael D. Irwin

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 4, 2011

Date

Signature of Attorney*

X /s/ Daniel Gary Hamm

Signature of Attorney for Debtor(s)

Daniel Gary Hamm ASB-9909-H68D

Printed Name of Attorney for Debtor(s)

Daniel G. Hamm, P. C.

Firm Name

560 South McDonough Street

Suite A

Montgomery, AL 36104

Address

Telephone Number

August 4, 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

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Case 11-81167 Doc 1 Filed 08/04/1

Signature of a Foreign Representative

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): Irwin, Michael D.

- ☐ 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.)

v

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.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of Alabama

In re	Michael D. Irwin		Case No.	
		Debtor(s)	Chapter	11

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applica	ble
statement.] [Must be accompanied by a motion for determination by the court.]	
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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.

through the Internet.);

Page 2

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or

☐ Active military duty in a military combat zone.

□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michael D. Irwin

Michael D. Irwin

Date: August 4, 2011

B4 (Official Form 4) (12/07)

United States Bankruptcy Court Middle District of Alabama

In re	Michael D. Irwin		Case No.	
		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 mailing address including zip 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 debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	Credit Card Account		32,769.63
American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	Credit Card Account		27,739.26
American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	Credit Card Account		10,921.37
American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	American Express Bankruptcy Department Post Office Box 981535 El Paso, TX 79998-1535	Credit Card Account		6,850.90
Bank of America Bankruptcy Department Post Office Box 15026 Wilmington, DE 19850-5026	Bank of America Bankruptcy Department Post Office Box 15026 Wilmington, DE 19850-5026	Credit Card Account		6,371.15
Bank of America Bankruptcy Department Post Office Box 15026 Wilmington, DE 19850-5026	Bank of America Bankruptcy Department Post Office Box 15026 Wilmington, DE 19850-5026	Credit Card Account		120,924.73
CACH, LLC - Equilease c/o cacsi 16011 College Blvd. Suite 101 Lenexa, KS 66219	CACH, LLC - Equilease c/o cacsi 16011 College Blvd. Lenexa, KS 66219	Co-signer on Business Loan		174,290.00
Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Credit Card Account		24,291.06
Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Credit Card Account		22,045.22

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Best Case Bankruptcy

B4 (Offi	cial Form 4) (12/07) - Cont
In re	Michael D. Irwin

Case No.	

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip 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 debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Credit Card Account		18,136.19
Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Credit Card Account		12,961.08
Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298	Credit Card Account		1,173.48
Citi Cards Bankruptcy Department Post Office Box 6500 Sioux Falls, SD 57117	Citi Cards Bankruptcy Department Post Office Box 6500 Sioux Falls, SD 57117	Line of Credit Account		45,369.22
Compass Bank Bankruptcy Department P.O. Box 2210 Decatur, AL 35699-0001	Compass Bank Bankruptcy Department P.O. Box 2210 Decatur, AL 35699-0001	Personal Loan		140,000.00
Discover Bankruptcy Department Post Office Box 30943 Wilmington, DE 19886-5251	Discover Bankruptcy Department Post Office Box 30943 Wilmington, DE 19886-5251	Credit Card Account		6,788.23
Discover Bankruptcy Department Post Office Box 30943 Wilmington, DE 19886-5251	Discover Bankruptcy Department Post Office Box 30943 Wilmington, DE 19886-5251	Credit Card Account		2,353.03
Sterling Bank Bankruptcy Department 4121 Carmichael Road Suite 100 Montgomery, AL 36106	Sterling Bank Bankruptcy Department 4121 Carmichael Road Montgomery, AL 36106	Business Loan		47,752.07
US Bank Bankruptcy Department Post Office Box 6333 Fargo, ND 58125-6333	US Bank Bankruptcy Department Post Office Box 6333 Fargo, ND 58125-6333	Credit Card Account		12,525.11
USAA Federal Savings Bank Bankruptcy Department Post Office Box 65020 San Antonio, TX 78265-5020	USAA Federal Savings Bank Bankruptcy Department Post Office Box 65020 San Antonio, TX 78265-5020	Credit Card Account		12,060.56

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B4 (Offic	cial Form 4) (12/07) - Cont.		
In re	Michael D. Irwin	Case No.	
	Debtor(s)		

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, Michael D. Irwin, 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	August 4, 2011	Signature	/s/ Michael D. Irwin
			Michael D. Irwin
			Debtor

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.

Michael D. Irwin 8672 Lillian Place Montgomery, AL 36117 Compass Bank
Bankruptcy Department
P.O. Box 2210
Decatur, AL 35699-0001

US Bank Bankruptcy Department Post Office Box 6333 Fargo, ND 58125-6333

IRS/Insolvency Post Office Box 7346 Philadelphia, PA 19101-7346 Compass Bank Customer Service Post Office Box 830927 Birmingham, AL 35283-0927 US Bank Bankruptcy Department Post Office Box 790408 Saint Louis, MO 63179-0408

Internal Revenue Service 801 Tom Martin Drive Mail Stop 126 Birmingham, AL 35211 Compass Bank Loan Department Post Office Box 192 Birmingham, AL 35201 USAA Federal Savings Bank Bankruptcy Department Post Office Box 65020 San Antonio, TX 78265-5020

State of Alabama
Department of Revenue
Legal Division
P.O. Box 320001
Montgomery, AL 36132-0001

Discover
Bankruptcy Department
Post Office Box 30943
Wilmington, DE 19886-5251

United States Attorney
P. O. Box 197
Montgomery, AL 36101-0197

Discover Products, Inc. c/o Capital Management Services, LP 726 Exchange Street Suite 700 Buffalo, NY 14210

American Express
Bankruptcy Department
Post Office Box 981535
El Paso, TX 79998-1535

Jim Tinnell

Bank of America Bankruptcy Department Post Office Box 15026 Wilmington, DE 19850-5026 Regions Bank Bankruptcy Department 8 Commerce Street Montgomery, AL 36104

CACH, LLC - Equilease c/o cacsi 16011 College Blvd. Suite 101 Lenexa, KS 66219 Regions Bank ATTN: Bankruptcy Department Post Office Box 11007 Birmingham, AL 35288

Chase Card Services Bankruptcy Department Post Office Box 15298 Wilmington, DE 19850-5298 Regions Bank Bankruptcy Department 1900 Fifth Avenue, North Birmingham, AL 35203

Citi Cards
Bankruptcy Department
Post Office Box 6500
Sioux Falls, SD 57117

Sterling Bank
Bankruptcy Department
4121 Carmichael Road
Suite 100
Montgomery, AL 36106

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