

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

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

Social Security number (If the bankruptcy
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.)

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

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Buckelew, Charles O.

Printed Name(s) of Debtor(s)

X /s/ Charles O. Buckelew

Signature of Debtor

3/16/2009

Date

Case No. (if known) _____

X _____
Signature of Joint Debtor (if any)

Date

**United States Bankruptcy Court
Northern District of Alabama**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Bucklew, Charles O.	Name of Joint Debtor (Spouse) (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. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4901	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. & Street, City, State & Zip Code): 1005 Section Line Rd. Albertville, AL	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):
ZIPCODE 35950	ZIPCODE
County of Residence or of the Principal Place of Business: Marshall	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address)	Mailing Address of Joint Debtor (if different from street address):
ZIPCODE	ZIPCODE

Location of Principal Assets of Business Debtor (if different from street address above):
1005 Section Line Rd., Albertville, AL

ZIPCODE **35950**

<p align="center">Type of Debtor (Form of Organization) (Check one box.)</p> <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<p align="center">Nature of Business (Check one box.)</p> <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	<p align="center">Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)</p> <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
<p align="center">Nature of Debts (Check one box.)</p> <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.		
<p align="center">Tax-Exempt Entity (Check box, if applicable.)</p> <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		

<p align="center">Filing Fee (Check one box)</p> <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	<p align="center">Chapter 11 Debtors</p> <p>Check one box:</p> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <p>Check if:</p> <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. <p>Check all applicable boxes:</p> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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<p>Statistical/Administrative Information</p> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	THIS SPACE IS FOR COURT USE ONLY																				
<p>Estimated Number of Creditors</p> <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>Over 100,000</td> </tr> </table>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000
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<p>Estimated Assets</p> <table style="width:100%; text-align: center;"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
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<p>Estimated Liabilities</p> <table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Buckelew, Charles O.
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Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>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 § 342(b) of the Bankruptcy Code.</p> <p style="text-align: center;">X _____ Signature of Attorney for Debtor(s) Date</p>
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Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.
 No

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition.

Information Regarding the Debtor - Venue
(Check any applicable box.)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property
(Check all applicable boxes.)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord or lessor that obtained judgment)

(Address of landlord or lessor)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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

Name of Debtor(s):
Buckelew, Charles O.

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 State 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.

/s/ Charles O. Buckelew

Signature of Debtor **Charles O. Buckelew**

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 16, 2009

Date

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.)

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.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Attorney*

/s/ Carla M. Handy

Signature of Attorney for Debtor(s)

**Carla M. Handy
 McCord and Martin
 P. O. Box 45
 Gadsden, AL 35902**

mccordandmartin@comcast.net

March 16, 2009

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 Non-Attorney 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); 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 bankruptcy 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.)

Address

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

Date

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.

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.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

IN RE:

Case No. _____

Buckelew, Charles O.

Chapter 11

Debtor(s)

**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 15 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 five 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 applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- 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 through the Internet.);
- 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/ Charles O. Buckelew

Date: March 16, 2009

**Document Page 7 of 28
United States Bankruptcy Court
Northern District of Alabama**

IN RE:

Case No. _____

Buckelew, Charles O.

Chapter **11**

Debtor(s)

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 and Fed. R. Bankr. P. 1007(m).

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim (if secured also state value of security)
Citizens Bank 324 N Broad St. Albertville, AL 35950		Bank loan		525,000.00 Collateral: 0.00 Unsecured: 525,000.00
Peoples Independent Bank P.O. Box 669 Boaz, AL 35957		Bank loan		156,357.90 Collateral: 0.00 Unsecured: 156,357.90
Eastern Funding C/O Marks & Weinberg P.O. Box 11386 Birmingham, AL 35202	Eastern Funding 213 West 35th St., Ste. 1000 New York, NY 10001	Trade debt		143,780.00
Compass Bank P.O. Box 830927 Birmingham, AL 35283-0927		Bank loan		60,000.00 Collateral: 0.00 Unsecured: 60,000.00
Wachovia 190 River Road, NJ3181 Summit, NJ 07901		Bank loan		59,240.00
Peoples Independent Bank P.O. Box 669 Boaz, AL 35957		Bank loan		51,212.75 Collateral: 0.00 Unsecured: 51,212.75
Compass Bank AZZ Albertville Comm. Lending 300 West Main St. Albertville, AL 35950		Bank loan		50,000.00 Collateral: 0.00 Unsecured: 50,000.00
Internal Revenue Service Cincinnati Service Center Cincinnati, OH 45999-0030				25,622.45
Bank Of America 4060 Ogletown/stanton Rd Newark, DE 19713	(800) 421-2110	Bank loan		20,827.00
Wachovia C/O Fia Card Services P.O. Box 15026 Wilmington, DE 19850-5026		Bank loan		20,641.55

Chase 800 Brookside Blvd Westerville, OH 43081	(800) 955-9900	Bank loan	19,107.00
Citifinancial 7520 Hwy 431 N Albertville, AL 35950-1130	Citifinancial P.O. Box 6931 The Lakes, NV 88901-6931	Bank loan	15,907.92
Vantage Bank P.O. Box 1606 Albertville, AL 35950		Bank loan	12,200.00
Esb/harley Davidson Cr 222 W Adams Chicago, IL 60606	(312) 368-9501	Bank loan	10,727.00 Collateral: 0.00 Unsecured: 10,727.00
Alfa Financial Corporation P.O. Box 11000 Montgomery, AL 36191-0001		Bank loan	6,945.50
Colonial Bank 32 Commerce St Montgomery, AL 36104	(251) 943-3930	Bank loan	6,925.00
Bancorpsouth P.O. Box 3370 Tupelo, MS 38803-3370	Najjar Denaburg 2125 Morris Avenue Birmingham, AL 35203	Bank loan	6,865.00
Wachovia Commercial Loan Services P.O. Box 740502 Atlanta, GA 30374-0502		Bank loan	5,045.06
Wachdfs Po Box 3117 Winston Salem, NC 27102	(336) 747-8325	Bank loan	4,843.00
Cap One Pob 30281 Salt Lake City, UT 84130	(800) 955-7070	Bank loan	4,725.00

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I 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 16, 2009 Signature /s/ Charles O. Buckelew
of Debtor **Charles O. Buckelew**

Date: _____ Signature _____
of Joint Debtor
(if any)

IN RE Buckelew, Charles O. Debtor(s) Case No. _____ (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, 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 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 40228-12-00 Citizens Bank 324 N Broad St. Albertville, AL 35950	H					525,000.00	525,000.00
		VALUE \$					
ACCOUNT NO. 0000000042 Compass Bank P.O. Box 830927 Birmingham, AL 35283-0927	H	equity line of credit				60,000.00	60,000.00
		VALUE \$					
ACCOUNT NO. 6094598 Compass Bank AZZ Albertville Comm. Lending 300 West Main St. Albertville, AL 35950	H					50,000.00	50,000.00
		VALUE \$					
ACCOUNT NO. 20060208344234 Esb/harley Davidson Cr 222 W Adams Chicago, IL 60606		Installment account opened 2/06				10,727.00	10,727.00
		VALUE \$					
Subtotal (Total of this page)						\$ 645,727.00	\$ 645,727.00
Total (Use only on last page)						\$	\$

1 continuation sheets attached

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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IN RE **Buckelew, Charles O.**

Case No. _____

Debtor(s)

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 16606 Peoples Independent Bank P.O. Box 669 Boaz, AL 35957	H				156,357.90	156,357.90
		VALUE \$				
ACCOUNT NO. 16607 Peoples Independent Bank P.O. Box 669 Boaz, AL 35957	H				51,212.75	51,212.75
		VALUE \$				
ACCOUNT NO. 852969517600001 State Farm Fncl Svcs F One State Farm Plaza Bloomington, IL 61710	H	Installment account opened 5/07 nonpurchase money security interest			3,515.00	3,515.00
		VALUE \$				
ACCOUNT NO.						
		VALUE \$				
ACCOUNT NO.						
		VALUE \$				
ACCOUNT NO.						
		VALUE \$				

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

Subtotal (Total of this page)	\$ 211,085.65	\$ 211,085.65
Total (Use only on last page)	\$ 856,812.65	\$ 856,812.65

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations
 Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case
 Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions
 Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans
 Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen
 Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals
 Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units
 Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution
 Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated
 Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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IN RE **Buckelew, Charles O.**

Case No. _____

Debtor(s)

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. 4901 Ala. Dept. Of Revenue Legal Div. P.O. Box 320001 Montgomery, AL 36132-0001	H	taxes owed				4,000.00	4,000.00	
ACCOUNT NO. xxx-xx-4901 Internal Revenue Service Cincinnati Service Center Cincinnati, OH 45999-0030	H	2006 taxes owed				25,622.45	22,168.11	3,454.34
ACCOUNT NO. Alice Martin, U.S. Attorney 200 Robert Vance Federal Bldg. 1800 Fifth Ave., North Birmingham, AL 35203		Assignee or other notification for: Internal Revenue Service						
ACCOUNT NO. Internal Revenue Service 801 Tom Martin Dr., Rm. 257 Birmingham, AL 35211		Assignee or other notification for: Internal Revenue Service						
ACCOUNT NO.								
ACCOUNT NO.								

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Totals of this page) \$ **29,622.45** \$ **26,168.11** \$ **3,454.34**

Total
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.) \$ **29,622.45**

Total
(Use only on last page of the completed Schedule E. If applicable,
report also on the Statistical Summary of Certain Liabilities and Related Data.) \$ **26,168.11** \$ **3,454.34**

IN RE **Buckelew, Charles O.**

Case No. _____

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT UNLIQUIDATED DISPUTED			AMOUNT OF CLAIM
ACCOUNT NO. B225868 Alfa Financial Corporation P.O. Box 11000 Montgomery, AL 36191-0001	H	insurance premiums				6,945.50
ACCOUNT NO. SC 044018 Alfa Insurance P.O. Box 11000 Montgomery, AL 36191-0001	H	earned unpaid premium,				1,358.50
ACCOUNT NO. 3-0633-1104173 Allied Waster Services 409 N. Hunter St. Anniston, AL 36201-8137	H	services rendered				334.09
ACCOUNT NO. 5480-4200-3297-1515 Arrow Financial For HSBC C/O Nelson, Watson & Associates P.O. Box 1299 Haverhill, MA 01831-1799	H	credit card				2,521.89

9 continuation sheets attached

Subtotal (Total of this page) \$ **11,159.98**

Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$

IN RE **Buckelew, Charles O.**

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. JA Cambece Eight Bourbon Street Peabody, MA 01960		Assignee or other notification for: Arrow Financial For HSBC				
ACCOUNT NO. 43021953 Arrow Fincl 5996 W Touhy Ave Niles, IL 60714						2,872.00
ACCOUNT NO. Hsbc Card Services Iii Inc		Assignee or other notification for: Arrow Fincl				
ACCOUNT NO. 13613448-001-13 AT&T P.O. Box 538695 Atlanta, GA 30353-8695	H	services rendered				551.42
ACCOUNT NO. buckelew Bama Pressure Systems, Inc. 957 County Road 607 Hanceville, AL 35077	H	credit acct.				973.37
ACCOUNT NO. 548313020100 Bancorpsouth P.O. Box 3370 Tupelo, MS 38803-3370		Revolving account opened 12/02				6,865.00
ACCOUNT NO. Najjar Denaburg 2125 Morris Avenue Birmingham, AL 35203		Assignee or other notification for: Bancorpsouth				

Sheet no. 1 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **11,261.79**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4776 Bank Of America 4060 Ogletown/stanton Rd Newark, DE 19713		Revolving account opened 9/68				20,827.00
ACCOUNT NO. 14/3480-1 Boaz Gas Board P.O. Box 594 Boaz, AL 35957	H	services provided				128.59
ACCOUNT NO. 529149237776 Cap One Pob 30281 Salt Lake City, UT 84130		Revolving account opened 1/02				4,725.00
ACCOUNT NO. Holloway & Moxley P.O. Box 4953 Montgomery, AL 36103		Assignee or other notification for: Cap One				
ACCOUNT NO. 66709 CardioVascular Associates 880 Montclair Rd., First Floor Birmingham, AL 35213	H	medical services				130.00
ACCOUNT NO. 312151 Chambers Bottling Company P.O. Box 750 Albertville, AL 35950	H	charge acct.				440.15
ACCOUNT NO. 8781 10 050 0207986 Charter Communications P.O. Box 9001912 Louisville, KY 40290-1912	H	services rendered				131.58

Sheet no. 2 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **26,382.32**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE Buckelew, Charles O.

Case No. _____

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Charter Business 904 Rose Rd. Albertville, AL 35951-3438		Assignee or other notification for: Charter Communications				
ACCOUNT NO. 8781100500016601 Charter Communications P.O. Box 9001912 Louisville, KY 40290-1912	H	services rendered				215.43
ACCOUNT NO. 540168305652 Chase 800 Brooksedge Blvd Westerville, OH 43081		Revolving account opened 9/07				19,107.00
ACCOUNT NO. 422765101233 Chase- Bp 800 Brooksedge Blvd Westerville, OH 43081		Revolving account opened 3/71				196.00
ACCOUNT NO. NAFS P.O. Box 9027 Williamsville, NY 14231-9027		Assignee or other notification for: Chase- Bp				
ACCOUNT NO. 3976701 Cherokee Electric Cooperative Drawer O Centre, AL 35960	H	services rendered				441.09
ACCOUNT NO. 0332270 Citifinancial 7520 Hwy 431 N Albertville, AL 35950-1130	H	money loaned				15,907.92

Sheet no. 3 of 9 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **35,867.44**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Citifinancial P.O. Box 6931 The Lakes, NV 88901-6931		Assignee or other notification for: Citifinancial				
ACCOUNT NO. xxxxxx5865 & 5840 Citizens Bank P.O. Box 250 Guntersville, AL 35976	H	overdraft accts				700.00
ACCOUNT NO. Citizens Bank & Trust 324 N Broad St. Albertville, AL 35950		Assignee or other notification for: Citizens Bank				
ACCOUNT NO. Jones, Milwee & Ross P.O. Box 940 Guntersville, AL 35976		Assignee or other notification for: Citizens Bank				
ACCOUNT NO. 8037332684 Colonial Bank 32 Commerce St Montgomery, AL 36104		Installment account opened 3/08				6,925.00
ACCOUNT NO. xxxxxxxx5102 Colonial Bank Attn: Collections/Recovery P.O. Box 1108 Montgomery, AL 36101	H	overdraft charges				1,521.06
ACCOUNT NO. 7910851 Compass Bank 15 20th St S Fl 9 Birmingham, AL 35233		Installment account opened 5/07				1,516.00

Sheet no. 4 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **10,662.06**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0770038476955 Compass Bank P.O. Box 10566 Birmingham, AL 35296	H	money loaned				1,268.63
ACCOUNT NO. 077-56094598 Compass Bank P.O. Box 830696 Birmingham, AL 35283-0696	H	money loaned				679.64
ACCOUNT NO. 910851 Compass Bank P.O. Box 192 Birmingham, AL 35201-0192	H	line of credit				0.00
ACCOUNT NO. 51910 Cook & Sons Ace Hardware P.O. Box 1206 Albertville, AL 35950	H	charge account				165.96
ACCOUNT NO. 60110044489 Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		Revolving account opened 10/07				3,660.00
ACCOUNT NO. charles Donald Buckelew 3284 Turnpike Rd. Albertville, AL 35950-0510	H	personal loan				12,000.00
ACCOUNT NO. Steve Beason 613 Preston Ave. Albertville, AL 35950-3807		Assignee or other notification for: Donald Buckelew				

Sheet no. 5 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **17,774.23**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE Buckelew, Charles O.

Debtor(s)

Case No. _____

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. CV-08-900102.00 Eastern Funding C/O Marks & Weinberg P.O. Box 11386 Birmingham, AL 35202	H	deficiency balance				143,780.00
ACCOUNT NO. Eastern Funding 213 West 35th St., Ste. 1000 New York, NY 10001		Assignee or other notification for: Eastern Funding				
ACCOUNT NO. 7302191202390826 Exxmbkciti Po Box 6497 Sioux Falls, SD 57117		Revolving account opened 5/87				40.00
ACCOUNT NO. 12362-31017 Farm Plan P.O. Box 650215 Dallas, TX 75265-0215	H	credit card				995.15
ACCOUNT NO. Farm Plan P.O. Box 5328 Madison, WI 53705		Assignee or other notification for: Farm Plan				
ACCOUNT NO. 001748 HMTC 9290 Hwy 431 Albertville, AL 35951	H	charge acct.				638.55
ACCOUNT NO. 62325 Knight Oil P.O. Box 1024 Albertville, AL 35950-1024	H	charge account				202.94

Sheet no. 6 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **145,656.64**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. various Marshall County Gas District P.O. Box 170 Guntersville, AL 35976	H	accts: 230-35658-01, 230-36790-01, 230-36224-01 services rendered				650.00
ACCOUNT NO. mcsf27008 Marshall Medical Center South C/O Upton Group P.O. Box 11407 Birmingham, AL 35246	H	medical services				50.00
ACCOUNT NO. various Municipal Utilities Board Of Albertville P.O. Box 130 Albertville, AL 35950-0003	H	utility service				2,200.00
ACCOUNT NO. 2020 NAPA Auto Parts 6485 Hwy 431 Albertville, AL 35950	H	charge acct.				36.27
ACCOUNT NO. 80/21950-0 NORTHEAST Alabama Water, Sewer & Fireort P.O. Box 681359 Fort Payne, AL 35968-1614	H	services rendered				70.89
ACCOUNT NO. 12425 Peoples Independent Bank P.O. Box 669 Boaz, AL 35957	H	money loaned				1,210.91
ACCOUNT NO. 12425 Peoples Independent Bank P.O. Box 669 Boaz, AL 35957	H					806.95

Sheet no. 7 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **5,025.02**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. bucch Ross-Graden Lumber P.O. Box 697 Albertville, AL 35950-0012	H	charge account				1,598.69
ACCOUNT NO. 15652 Sand Mountain Pest Management 694 Al Hwy 75 N Albertville, AL 35951	H	services rendered				57.00
ACCOUNT NO. 4144 Sand Mountain Pest Management 694 Al Hwy 75 N Albertville, AL 35951	H	services rendered				120.00
ACCOUNT NO. 517849188 Shell/citi Po Box 6497 Sioux Falls, SD 57117		Revolving account opened 3/00				445.00
ACCOUNT NO. Acb American Inc P.O. Box 2548 Cincinnati, OH 45201-2548		Assignee or other notification for: Shell/citi				
ACCOUNT NO. 569086095 T-Mobile P.O. Box 742596 Cincinnati, OH 45274-2596	H	services rendered				334.31
ACCOUNT NO. 1500104456 Vantage Bank P.O. Box 1606 Albertville, AL 35950	H	deficiency balance				12,200.00

Sheet no. 8 of 9 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **14,755.00**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

IN RE **Buckelew, Charles O.**

Case No. _____

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 325401000191974 Wachdfs Po Box 3117 Winston Salem, NC 27102		Installment account opened 3/07				4,843.00
ACCOUNT NO. xxxx-xxxx-xxxx-3125 Wachovia C/O Fia Card Services P.O. Box 15026 Wilmington, DE 19850-5026	H	credit card				20,641.55
ACCOUNT NO. 05-52-4108684-6 Wachovia Commercial Loan Services P.O. Box 740502 Atlanta, GA 30374-0502	H	money loaned				5,045.06
ACCOUNT NO. 0810191177 Wachovia 190 River Road, NJ3181 Summit, NJ 07901	H	line of credit				59,240.00
ACCOUNT NO. 14060 Weathers P.O. Box 457 Albertville, AL 35950	H	charge account				2,447.12
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. **9** of **9** continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **92,216.73**

Total
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$ **370,761.21**

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: March 16, 2009 Signature: /s/ Charles O. Buckelew
Charles O. Buckelew Debtor

Date: _____ Signature: _____
(Joint Debtor, if any)
[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer _____ Social Security No. (Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address _____

Signature of Bankruptcy Petition Preparer _____ Date _____

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 signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision 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.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to 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.

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IN RE:

Case No. _____

Buckelew, Charles O.

Chapter 11

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: March 16, 2009

Signature: /s/ Charles O. Buckelew
Charles O. Buckelew

Debtor

Date: _____

Signature: _____

Joint Debtor, if any

Buckelew, Charles O.
1005 Section Line Rd.
Albertville, AL 35950

AT&T
P.O. Box 538695
Atlanta, GA 30353-8695

Chase
800 Brooksedge Blvd
Westerville, OH 43081

McCord and Martin
P. O. Box 45
Gadsden, AL 35902

Bama Pressure Systems, Inc.
957 County Road 607
Hanceville, AL 35077

Chase- Bp
800 Brooksedge Blvd
Westerville, OH 43081

Acb American Inc
P.O. Box 2548
Cincinnati, OH 45201-2548

Bancorpsouth
P.O. Box 3370
Tupelo, MS 38803-3370

Cherokee Electric Cooperative
Drawer O
Centre, AL 35960

Ala. Dept. Of Revenue Legal Div.
P.O. Box 320001
Montgomery, AL 36132-0001

Bank Of America
4060 Ogletown/stanton Rd
Newark, DE 19713

Citifinancial
7520 Hwy 431 N
Albertville, AL 35950-1130

Alfa Financial Corporation
P.O. Box 11000
Montgomery, AL 36191-0001

Boaz Gas Board
P.O. Box 594
Boaz, AL 35957

Citifinancial
P.O. Box 6931
The Lakes, NV 88901-6931

Alfa Insurance
P.O. Box 11000
Montgomery, AL 36191-0001

Cap One
Pob 30281
Salt Lake City, UT 84130

Citizens Bank
P.O. Box 250
Guntersville, AL 35976

Alice Martin, U.S. Attorney
200 Robert Vance Federal Bldg.
1800 Fifth Ave., North
Birmingham, AL 35203

CardioVascular Associates
880 Montclair Rd., First Floor
Birmingham, AL 35213

Citizens Bank
324 N Broad St.
Albertville, AL 35950

Allied Waster Services
409 N. Hunter St.
Anniston, AL 36201-8137

Chambers Bottling Company
P.O. Box 750
Albertville, AL 35950

Citizens Bank & Trust
324 N Broad St.
Albertville, AL 35950

Arrow Financial For HSBC
C/O Nelson, Watson & Associates
P.O. Box 1299
Haverhill, MA 01831-1799

Charter Business
904 Rose Rd.
Albertville, AL 35951-3438

Colonial Bank
32 Commerce St
Montgomery, AL 36104

Arrow Fincl
5996 W Touhy Ave
Niles, IL 60714

Charter Communications
P.O. Box 9001912
Louisville, KY 40290-1912

Colonial Bank
Attn: Collections/Recovery
P.O. Box 1108
Montgomery, AL 36101

Compass Bank
15 20th St S Fl 9
Birmingham, AL 35233

Eastern Funding
213 West 35th St., Ste. 1000
New York, NY 10001

Jones, Milwee & Ross
P.O. Box 940
Guntersville, AL 35976

Compass Bank
P.O. Box 10566
Birmingham, AL 35296

Esb/harley Davidson Cr
222 W Adams
Chicago, IL 60606

Knight Oil
P.O. Box 1024
Albertville, AL 35950-1024

Compass Bank
P.O. Box 830927
Birmingham, AL 35283-0927

Exxmbliciti
Po Box 6497
Sioux Falls, SD 57117

Marshall County Gas District
P.O. Box 170
Guntersville, AL 35976

Compass Bank
P.O. Box 830696
Birmingham, AL 35283-0696

Farm Plan
P.O. Box 650215
Dallas, TX 75265-0215

Marshall Medical Center South
C/O Upton Group
P.O. Box 11407
Birmingham, AL 35246

Compass Bank
AZZ Albertville Comm. Lending
300 West Main St.
Albertville, AL 35950

Farm Plan
P.O. Box 5328
Madison, WI 53705

Municipal Utilities Board Of Albertville
P.O. Box 130
Albertville, AL 35950-0003

Compass Bank
P.O. Box 192
Birmingham, AL 35201-0192

HMTC
9290 Hwy 431
Albertville, AL 35951

NAFS
P.O. Box 9027
Williamsville, NY 14231-9027

Cook & Sons Ace Hardware
P.O. Box 1206
Albertville, AL 35950

Holloway & Moxley
P.O. Box 4953
Montgomery, AL 36103

Najjar Denaburg
2125 Morris Avenue
Birmingham, AL 35203

Discover Fin Svcs Llc
Po Box 15316
Wilmington, DE 19850

Internal Revenue Service
Cincinnati Service Center
Cincinnati, OH 45999-0030

NAPA Auto Parts
6485 Hwy 431
Albertville, AL 35950

Donald Buckelew
3284 Turnpike Rd.
Albertville, AL 35950-0510

Internal Revenue Service
801 Tom Martin Dr., Rm. 257
Birmingham, AL 35211

NORTHEAST Alabama Water, Sewer &
Fireort
P.O. Box 681359
Fort Payne, AL 35968-1614

Eastern Funding
C/O Marks & Weinberg
P.O. Box 11386
Birmingham, AL 35202

JA Cambece
Eight Bourbon Street
Peabody, MA 01960

Peoples Independent Bank
P.O. Box 669
Boaz, AL 35957

Ross-Graden Lumber
P.O. Box 697
Albertville, AL 35950-0012

Wachovia
190 River Road, NJ3181
Summit, NJ 07901

Sand Mountain Pest Management
694 Al Hwy 75 N
Albertville, AL 35951

Weathers
P.O. Box 457
Albertville, AL 35950

Shell/citi
Po Box 6497
Sioux Falls, SD 57117

State Farm Fncl Svcs F
One State Farm Plaza
Bloomington, IL 61710

Steve Beason
613 Preston Ave.
Albertville, AL 35950-3807

T-Mobile
P.O. Box 742596
Cincinnati, OH 45274-2596

Vantage Bank
P.O. Box 1606
Albertville, AL 35950

Wachdfs
Po Box 3117
Winston Salem, NC 27102

Wachovia
C/O Fia Card Services
P.O. Box 15026
Wilmington, DE 19850-5026

Wachovia
Commercial Loan Services
P.O. Box 740502
Atlanta, GA 30374-0502

IN RE:

Case No. _____

Buckelew, Charles O.

Chapter **11**

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **225.00/hr**
 Prior to the filing of this statement I have received \$ **5,000.00**
 Balance Due \$ _____

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):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
 e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

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CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 16, 2009

Date

/s/ Carla M. Handy

Carla M. Handy
 McCord and Martin
 P. O. Box 45
 Gadsden, AL 35902

mccordandmartin@comcast.net