	ates Bankruptcy (n District of Alab	T7 1 4 T3 4°4°							
Name of Debtor (if individual, enter Last, First, Mid Ho, Stephen PK	dle):	Name of Joint Debtor (Spouse) (Last, First, Middle):							
All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names):	ars	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 EIN (if more than one, state all): 2882	I.D. (ITIN) No./Complete	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 & 12239 County Road 1 Fairhope, AL	& Zip Code):	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):							
i airriope, AL	ZIPCODE 36532-5948	1		2	ZIPCODE				
County of Residence or of the Principal Place of Bus Baldwin	siness:	County of Resi	dence or of the Principal Pla	ce of Busin	ess:				
Mailing Address of Debtor (if different from street a 12239 County Road 1 Fairhope, AL	ddress)	Mailing Addre	ss of Joint Debtor (if differer	nt from stree	et address):				
Tallifopo, AL	ZIPCODE 36532-5948			2	ZIPCODE				
Location of Principal Assets of Business Debtor (if o	lifferent from street address	above):							
				7	ZIPCODE				
Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Filing Fee (Check one box Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable to attach signed application for the court's considera is unable to pay fee except in installments. Rule 1 3A.	o individuals only). Must tion certifying that the debto 006(b). See Official Form	ne box.) state as defined in 11 npt Entity f applicable.) pt organization under distates Code (the de). Check one box Debtor is a single Debtor is not completed. Check if: Debtor's agaffiliates are	The Petition The Petition Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Debts are primaril debts, defined in 1 \$ 101(8) as "incurrindividual primaril personal, family, o hold purpose." Chapter 11 Is: small business debtor as defined a small business debtor as defined as defined as defined as debtor as defined as	n is Filed (Chap Reco Main Chap Reco Nonr Nature of I (Check one ly consumer 1 U.S.C. red by an ly for a or house- Debtors med in 11 U defined in 1	box.) Debts are primarily business debts. S.C. § 101(51D). U.S.C. § 101(51D).				
Filing Fee waiver requested (Applicable to chapte attach signed application for the court's considera		Acceptances	ing filed with this petition of the plan were solicited praccordance with 11 U.S.C. §		om one or more classes of				
	 ✓ Debtor estimates that funds will be available for distribution to unsecured creditors. ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for 								
Estimated Number of Creditors			,001- 50,001- ,000 100,000	Over 100,000					
			00,000,001 \$500,000,001 \$500 million to \$1 billion	More than \$1 billion					
Estimated Liabilities	000,001 to \$10,000,001		00,000,001 \$500,000,001 \$500 million to \$1 billion	More than \$1 billion					

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Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Ho, Stephen PK						
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 mor	re than one, attach additional sheet)					
Name of Debtor: None	Case Number:	Date Filed:					
District:	Relationship:	Judge:					
Exhibit A (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.) Exhibit A is attached and made a part of this petition.	o whose debts are primarily consumer debts.)						
	X /s/ Barry A Friedman	6/12/09					
Does the debtor own or have possession of any property that poses or is a or safety? Yes, and Exhibit C is attached and made a part of this petition. No	alleged to pose a threat of imminen	t and identifiable harm to public health					
Exhi (To be completed by every individual debtor. If a joint petition is filed, ex ✓ Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: □ Exhibit D also completed and signed by the joint debtor is attached.	ach spouse must complete and attached a part of this petition.	ch a separate Exhibit D.)					
Information Regardio	ng the Debtor - Venue						
	oplicable box.) of business, or principal assets in the	is District for 180 days immediately					
There is a bankruptcy case concerning debtor's affiliate, general		his District.					
Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	ace of business or principal assets out is a defendant in an action or pro	in the United States in this District, occeding [in a federal or state court]					
Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.)						
(Name of landlord or lesso	or that obtained judgment)						
(Address of lan	dlord or lessor)						
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for positive to the property of							
☐ Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	aring the 30-day period after the					
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).						

Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Ho, Stephen PK
	atures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
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.	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.
X /s/ Stephen PK Ho Signature of Debtor Stephen PK Ho	Signature of Foreign Representative
X	Printed Name of Foreign Representative
Signature of Joint Debtor Telephone Number (If not represented by attorney) June 12, 2009 Date	Date
Signature of Attorney*	Signature of Non-Attorney Petition Preparer
X /s/ Barry A Friedman Signature of Attorney for Debtor(s) Barry A Friedman Barry A Friedman & Associates, PC Post Office Box 2394 Mobile, AL 36652 bky@bafmobile.com	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
June 12, 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.	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 Debtor (Corporation/Partnership)	X
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 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:
Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual Date	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.
Date	

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Date: June 12, 2009

United States Bankruptcy Court Southern District of Alabama

Souther	n District of Alabama
IN RE:	Case No.
Ho, Stephen PK	Chapter 11
	EBTOR'S STATEMENT OF COMPLIANCE OUNSELING REQUIREMENT
do so, you are not eligible to file a bankruptcy case, and whatever filing fee you paid, and your creditors will be a	e five statements regarding credit counseling listed below. If you cannot the court can dismiss any case you do file. If that happens, you will lose able to resume collection activities against you. If your case is dismissed required to pay a second filing fee and you may have to take extra steps
Every individual debtor must file this Exhibit D. If a joint pet one of the five statements below and attach any documents	ition is filed, each spouse must complete and file a separate Exhibit D. Check as directed.
the United States trustee or bankruptcy administrator that o	acticy case , I received a briefing from a credit counseling agency approved by putlined the opportunities for available credit counseling and assisted me in from the agency describing the services provided to me. Attach a copy of the d through the agency.
the United States trustee or bankruptcy administrator that operforming a related budget analysis, but I do not have a cert	stey case , I received a briefing from a credit counseling agency approved by putlined the opportunities for available credit counseling and assisted me in tificate from the agency describing the services provided to me. You must file as provided to you and a copy of any debt repayment plan developed through the is filed.
	om an approved agency but was unable to obtain the services during the five a sexigent circumstances merit a temporary waiver of the credit counseling trize exigent circumstances here.]
you file your bankruptcy petition and promptly file a certion of any debt management plan developed through the age case. Any extension of the 30-day deadline can be grantealso be dismissed if the court is not satisfied with your accounseling briefing.	It still obtain the credit counseling briefing within the first 30 days after ificate from the agency that provided the counseling, together with a copy ency. Failure to fulfill these requirements may result in dismissal of your ed only for cause and is limited to a maximum of 15 days. Your case may reasons for filing your bankruptcy case without first receiving a credit
motion for determination by the court.]	g because of: [Check the applicable statement.] [Must be accompanied by a
of realizing and making rational decisions with respe	paired by reason of mental illness or mental deficiency so as to be incapable ect to financial responsibilities.);
 Disability. (Defined in 11 U.S.C. § 109(h)(4) as phy participate in a credit counseling briefing in person, Active military duty in a military combat zone. 	nysically impaired to the extent of being unable, after reasonable effort, to by telephone, or through the Internet.);
5. The United States trustee or bankruptcy administrator does not apply in this district.	has determined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provide	led above is true and correct.
Signature of Debtor: /s/ Stephen PK Ho	

Case No.

(If known)

Liabilities and Related

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. (See Instructions Above.)	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.	Х			T	T	Х	107,014.00	
Chase PO Box 9001020 Louisville, KY 40290-1020			VALUE \$ 495,000.00					
ACCOUNT NO.	Х			T	T	Х	499,714.00	111,728.00
Chase Home Finance PO Box 78420 Phoenix, AZ 85062-8420			VALUE \$ 495,000.00				·	
ACCOUNT NO.	Х		VALUE # 455,000.00	H	\vdash	Х	14,378.00	14,378.00
Chase Home Finance PO Box 78420 Phoenix, AZ 85062-8420			VALUE \$,
ACCOUNT NO.	Х		VALUE \$	H	H	Х	140,503.00	140,503.00
Chase Home Finance PO Box 78420 Phoenix, AZ 85062-8420								
			VALUE \$					
1 continuation sheets attached			(Total of th		otot		\$ 761,609.00	\$ 266,609.00
			(Use only on la		Tot oage		\$	\$
							(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain

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(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

Suntrust Mortgage Post Office Box 79041 Baltimore, MD 21279-0041 VALUE S ACCOUNT NO. VALUE S ACCOUNT NO. VALUE S ACCOUNT NO. VALUE S ACCOUNT NO. VALUE S VALUE S ACCOUNT NO. VALUE S ACCOUNT NO. VALUE S				(Continuation Sneet)	(Continuation Sheet)								
Suntrust Mortgage	CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	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	CLAIM WITHOUT DEDUCTING VALUE OF					
VALUE S	ACCOUNT NO.	X			T		Х	159,744.77	159,744.77				
ACCOUNT NO. VALUE \$ V	Suntrust Mortgage Post Office Box 79041 Baltimore, MD 21279-0041			VALUE \$									
ACCOUNT NO. VALUE S Subtotal (Total of this page) is page in the page of the page in the page in the page is page in the p	A CICOLINE NO			VALUE \$	╁	┢							
ACCOUNT NO. VALUE \$ VALUE \$	ACCOUNT NO.												
ACCOUNT NO. VALUE S				VALUE \$									
ACCOUNT NO. VALUE \$ V	ACCOUNT NO.												
ACCOUNT NO. VALUE \$ V				VALUE \$	1								
ACCOUNT NO. VALUE \$ V	ACCOUNT NO.												
ACCOUNT NO. VALUE \$ V				VALUE \$	1								
WALUE \$ Sheet no. 1 of 1 continuation sheets attached to schedule of Creditors Holding Secured Claims Sheet no. 1 total (Use only on last page) Total (Use only on last page) \$ 921,353.77 \$ 426,353.77	ACCOUNT NO.												
Sheet no. 1 of 1 continuation sheets attached to Subtotal chedule of Creditors Holding Secured Claims (Total of this page) Total (Use only on last page) 921,353.77 \$ 426,353.77	ACCOUNT NO.												
Schedule of Creditors Holding Secured Claims (Total of this page) Total (Use only on last page) \$ 159,744.77 \$ 159,744.77 \$ 426,353.77				VALUE \$									
(Use only on last page) \$\ \\ 921,353.77 \ \\ \\$ 426,353.77	Sheet no. 1 of 1 continuation sheets attache Schedule of Creditors Holding Secured Claims	ed	to	(Total of t	nis j	page	e)	\$ 159,744.77	\$ 159,744.77				
				(Use only on l	ast j	page	a1 e)						

(Report also on Summary of Schedules.)

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

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Debtor(s)

Case No. _____(If known)

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.

	istical Summary of Certain Liabilities and Related Data.
liste	eport the total of amounts <u>not</u> 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 d 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 Statistical Summary of Certain Liabilities and Related Data.
V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES 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.
	0 continuation sheets attached

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(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. (See Instructions Above.)	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.			2009 credit card			x	
A T & T PO Box 6940 The Lakes, NV 88901-6940							4,430.00
ACCOUNT NO.			2009 credit card			X	
American Express PO Box 650448 Dallas, TX 75265-0448							11,286.00
ACCOUNT NO.			2009 credit card			x	
BBVA Compass Bank Post Office Box 2210 Decatur, AL 35699-0001							11,565.00
ACCOUNT NO.			2009 credit card	П		x	<u> </u>
Capital One PO Box 6492 Carol Stream, IL 60197-6492							19,560.00
2 continuation sheets attached			(Total of th	Subt			\$ 46,841.00
- continuation sheets attached			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate	T also atis	otal o or tical	ıl n	

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

	(Continuation Sheet)							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			2009 credit card	+		Х		
Chase PO Box 94014 Palatine, IL 60094-4014							25 202 00	
ACCOUNT NO.	-		2009 credit card	╁		Х	25,303.00	
Chase PO Box 94014 Palatine, IL 60094-4014			2000 Credit Gurd				10,606.00	
ACCOUNT NO.			2009 credit card	\dagger		Х	10,000.00	
Chase Bank USA NA PO Box 94014 Palatine, IL 60094-4014							19,209.00	
ACCOUNT NO.			2009 credit card	+		Х	13,203.00	
Citi PO Box 6401 The Lakes, NV 88901-0001							0.012.00	
ACCOUNT NO.			2009 credit card	+		Х	9,013.00	
Discover PO Box 71084 Charlotte, NC 28272-1084							28 044 00	
ACCOUNT NO.	Х		2009 credit card	+		Х	28,944.00	
FIA Card Services PO Box 851001 Dallas, TX 75285-1001			2000 ordan ouru					
				\perp			92,454.00	
ACCOUNT NO. HSBC PO Box 9600 Carol Stream, IL 60128-0001			2009 credit card			X	2 220 00	
Sheet no1 of2 continuation sheets attached to			<u> </u>	Sub			2,230.00	
				,				

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

			Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			2009 credit card			х	
Sears Payment Center PO Box 182149 Columbus, OH 43218-2149			2000 Stouth Guild				8,581.00
ACCOUNT NO.							5,0000
ACCOUNT NO.							
ACCOUNT NO.	-						
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the S	T t als	age Fota o o	e) al n	\$ 8,581.00
			the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	atis d D	ata.	.)	\$ 243,181.00

A T & T PO Box 6940 The Lakes, NV 88901-6940

American Express PO Box 650448 Dallas, TX 75265-0448

BBVA Compass Bank Post Office Box 2210 Decatur, AL 35699-0001

Capital One PO Box 6492 Carol Stream, IL 60197-6492

Chase PO Box 9001020 Louisville, KY 40290-1020

Chase PO Box 94014 Palatine, IL 60094-4014

Chase Bank USA NA PO Box 94014 Palatine, IL 60094-4014

Chase Home Finance PO Box 78420 Phoenix, AZ 85062-8420

Citi PO Box 6401 The Lakes, NV 88901-0001 Discover PO Box 71084 Charlotte, NC 28272-1084

FIA Card Services PO Box 851001 Dallas, TX 75285-1001

HSBC PO Box 9600 Carol Stream, IL 60128-0001

Joyce L Ho 12239 County Road 1 Fairhope, AL 36532-5948

Sears Payment Center PO Box 182149 Columbus, OH 43218-2149

Suntrust Mortgage Post Office Box 79041 Baltimore, MD 21279-0041