| B1 (Official Form 1)(1/08) | | | | | | | | |
|--|---|------------------------------|--|---|--|---|--|--|
| United S | Court | urt Voluntary Petitio | | | | ry Petition | | |
| Name of Debtor (if individual, enter Last, First, Middle): REIFMAN, BARRY L | | | | Name of Joint Debtor (Spouse) (Last, First, Middle): REIFMAN, JOANNE | | | | |
| 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) xxx-xx-3010 | | | | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-8644 | | | | |
| Street Address of Debtor (No. and Street, City, and State): 15626 HANA MAUI DR PHOENIX, AZ ZIP Code | | | | Street Address of Joint Debtor (No. and Street, City, and State): 15626 HANA MAUI DR PHOENIX, AZ ZIP Code | | | | |
| | 8 | 35022 | | 85022 | | | | |
| County of Residence or of the Principal Place of Business: MARICOPA | | | | County of Residence or of the Principal Place of Business: MARICOPA | | | | |
| Mailing Address of Debtor (if different from street address): | | | | Mailing Address of Joint Debtor (if different from street address): | | | | |
| | _ | ZIP Code | _ | | | | | ZIP Code |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | | | | | | |
| Type of Debtor Nature of Business (Form of Organization) (Check one box) Individual (includes Joint Debtors) Bee 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.) Check this box and state type of entity below.) Nature of Business (Check one box) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organiz under Title 26 of the United Stocode (the Internal Revenue Code) | | | lefined | □ Chapt □ Chapt ■ Chapt □ Chapt □ Chapt | the I er 7 er 9 er 11 er 12 | Petition is Fil | tcy Code Under led (Check one bo hapter 15 Petition a Foreign Main P hapter 15 Petition a Foreign Nonma | ox) for Recognition roceeding for Recognition |
| | | | nization States | ates "incurred by an individual primarily for | | | | |
| Filing Fee (Check one box) Full Filing Fee attached 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. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | | Debtor is if: Debtor's a to insiders all applica A plan is Acceptand | a small busin not a small bu aggregate nor s or affiliates) ble boxes: being filed w ces of the play | usiness debto ncontingent lid are less than ith this petitic n were solicit | defined in 11 U.S r as defined in 11 quidated debts (es \$2,190,000. | U.S.C. § 101(51D). ccluding debts owed |
| Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. THIS SPACE IS FOR COURT USE ONLY 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 | | | | | | | | |
| 1- 50- 100- 200- 49 99 199 999 | ☐ □ 1,000- 5,001- 5,000 10,000 | 10,001- | 25,001- 50,000 | □ 50,001- 100,000 | OVER 100,000 | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$500,001 to \$500,000 to \$1 to \$1 to million to \$100,000 to \$1 | \$1,000,001 \$10,000,001 \$10 to \$50 nillion million | \$50,000,001 5 to \$100 f |] \$100,000,001 o \$500 nillion | 500,000,001 to \$1 billion | | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 5 \$50,000 \$100,000 \$500,000 to \$1 t | \$1,000,001 \$10,000,001 \$10 to \$50 million million | \$50,000,001 Sto \$100 to | 5100,000,001 o \$500 nillion | 5500,000,001 to \$1 billion | More than \$1 billion | | | |

| B1 (Official For | m 1)(1/08) | | Page 2 | | | |
|--|--|--|---|--|--|--|
| Voluntar | y Petition | Name of Debtor(s): REIFMAN, BARRY L | | | | |
| (This nage mu | • Ist be completed and filed in every case) | REIFMAN, BARRY L REIFMAN, JOANNE | | | | |
| 11110 1400 | All Prior Bankruptcy Cases Filed Within Last | | ttach additional sheet) | | | |
| Location | | Case Number: | Date Filed: | | | |
| Where Filed: | - None - | | | | | |
| Location Where Filed: | | Case Number: | Date Filed: | | | |
| | ending Bankruptcy Case Filed by any Spouse, Partner, or | Affiliate of this Debtor (If m | | | | |
| Name of Debt - None - | or: | Case Number: | Date Filed: | | | |
| District: | | Relationship: | Judge: | | | |
| | Exhibit A | Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) | | | | |
| forms 10K a pursuant to S and is reques | pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.) A is attached and made a part of this petition. | I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X /s/ DENNIS J. WORTMAN October 30, 2009 Signature of Attorney for Debtor(s) (Date) DENNIS J. WORTMAN 002136 | | | | |
| | | nibit C | | | | |
| | or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition. | | entifiable harm to public health or safety? | | | |
| 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 and made a part of this petition. | | | | | | |
| | Information Regardin | - | | | | |
| _ | (Check any ap | - | | | | |
| | Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for | | | | | |
| | 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 Reside (Check all ann | | 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 that obtained judgment) | | | | | |
| | (Address of landlord) | | | | | |
| | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f | | | | | |
| | Debtor has included in this petition the deposit with the co after the filing of the petition. | ourt of any rent that would beco | ome due during the 30-day period | | | |

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

| B1 (Official Form 1)(1/08) | Page 3 Name of Debtor(s): | | |
|--|---|--|--|
| Voluntary Petition | REIFMAN, BARRY L | | |
| (This page must be completed and filed in every case) | REIFMAN, JOANNE | | |
| Sign | natures | | |
| 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. | 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 | | |
| [If petitioner is an individual whose debts are primarily consumer debts and | proceeding, and that I am authorized to file this petition. | | |
| has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief | (Check only one box.) | | |
| available under each such chapter, and choose to proceed under chapter 7. | ☐ I request relief in accordance with chapter 15 of title 11. United States Code. | | |
| [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). | 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 | | |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. | | |
| $\mathbf X$ /s/ BARRY L REIFMAN | X | | |
| Signature of Debtor BARRY L REIFMAN | Signature of Foreign Representative | | |
| | | | |
| X_/s/ JOANNE REIFMAN | Printed Name of Foreign Representative | | |
| Signature of Joint Debtor JOANNE REIFMAN | | | |
| | Date | | |
| Telephone Number (If not represented by attorney) | Signature of Non-Attorney Bankruptcy Petition Preparer | | |
| October 30, 2009 | I declare under penalty of perjury that: (1) I am a bankruptcy petition | | |
| Date | preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for | | |
| Signature of Attorney* | 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 | | |
| X /s/ DENNIS J. WORTMAN | 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 | | |
| Signature of Attorney for Debtor(s) | 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. | | |
| DENNIS J. WORTMAN 002136 | Official Form 19 is attached. | | |
| Printed Name of Attorney for Debtor(s) | | | |
| _ DENNIS J. WORTMAN, P.C. Firm Name | Printed Name and title, if any, of Bankruptcy Petition Preparer | | |
| 202 EAST EARLL DRIVE STE. 490 | | | |
| PHOENIX, AZ 85012 | Social-Security number (If the bankrutpcy petition preparer is not | | |
| | an individual, state the Social Security number of the officer, | | |
| Address | principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.) | | |
| Address | preparer.)(Required by 11 0.s.C. § 110.) | | |
| Email: djwortman@azbar.org 602-257-0101 Fax: 602-279-5650 | | | |
| Telephone Number | | | |
| October 30, 2009 | | | |
| Date | Address | | |
| *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a | X | | |
| certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. | | | |
| | Date | | |
| Signature of Debtor (Corporation/Partnership) | | | |
| The share we do not share the structure does do a later model a manufact to do a | Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. | | |
| 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. | Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is | | |
| The debtor requests relief in accordance with the chapter of title 11, United | not an individual: | | |
| States Code, specified in this petition. | | | |
| X | | | |
| Signature of Authorized Individual | | | |
| | If more than one person prepared this document, attach additional sheets | | |
| Printed Name of Authorized Individual | conforming to the appropriate official form for each person. | | |
| | A bankruptcy petition preparer's failure to comply with the provisions of | | |
| Title of Authorized Individual | 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 | | | |

United States Bankruptcy Court District of Arizona

BARRY L REIFMANIn reJOANNE REIFMAN

Debtor(s)

Case No. Chapter

11

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

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

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

■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.

 \Box 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.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

□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/ BARRY L REIFMAN
BARRY L REIFMAN

Date: October 30, 2009

United States Bankruptcy Court District of Arizona

BARRY L REIFMANIn reJOANNE REIFMAN

Debtor(s)

Case No. Chapter

11

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

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■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*.

 \Box 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.*

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B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

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□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/ JOANNE REIFMAN JOANNE REIFMAN

Date: October 30, 2009