

B1 (Official Form 1)(4/10)

**United States Bankruptcy Court  
Central District of California**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Lewis, Thyme</b>	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) <b>xxx-xx-0516</b>	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. and Street, City, and State): <b>15 Catamaran Street Apt. 3 Marina Del Rey, CA</b> <div style="text-align: right; font-size: small;">ZIP Code <b>90292-5778</b></div>	Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>
County of Residence or of the Principal Place of Business: <b>Los Angeles</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>	Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>

Location of Principal Assets of Business Debtor (if different from street address above):

<p><b>Type of Debtor</b> (Form of Organization) (Check one box)</p> <p><input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)</p>	<p><b>Nature of Business</b> (Check one box)</p> <p><input type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input checked="" type="checkbox"/> Other</p> <hr/> <p><b>Tax-Exempt Entity</b> (Check box, if applicable)</p> <p><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p>	<p><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)</p> <p><input type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input checked="" type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p> <hr/> <p><b>Nature of Debts</b> (Check one box)</p> <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."</p> <p><input checked="" type="checkbox"/> Debts are primarily business debts.</p>
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<p><b>Filing Fee</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><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.</p> <p><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>	<p><b>Chapter 11 Debtors</b></p> <p>Check one box:</p> <p><input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p>Check if:</p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>).</p> <p>Check all applicable boxes:</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><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).</p>
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<p><b>Statistical/Administrative Information</b></p> <p><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</p> <p><input 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.</p>	<p>THIS SPACE IS FOR COURT USE ONLY</p>										
<p><b>Estimated Number of Creditors</b></p> <table style="width:100%; text-align: center; font-size: small;"> <tr> <td><input checked="" type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 200-999</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> 25,001-50,000</td> <td><input type="checkbox"/> 50,001-100,000</td> <td><input type="checkbox"/> OVER 100,000</td> </tr> </table>	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000	
<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000		
<p><b>Estimated Assets</b></p> <table style="width:100%; text-align: center; font-size: small;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input checked="" type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>	<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
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<p><b>Estimated Liabilities</b></p> <table style="width:100%; text-align: center; font-size: small;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input checked="" type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>	<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Lewis, Thyme</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>- None -</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>- None -</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (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.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	<b>Exhibit B</b> <small>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</small> 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).  <b>X</b> _____ Signature of Attorney for Debtor(s) (Date)		
<b>Exhibit C</b>			
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? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)			
<input checked="" type="checkbox"/> 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. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> 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.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes)			
<input type="checkbox"/> 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)			
<input type="checkbox"/> 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 <input type="checkbox"/> 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. <input type="checkbox"/> 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):

**Lewis, Thyme**

**Signatures**

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

I declare under penalty of perjury that the information provided in this petition is true and correct.  
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ Thyme Lewis**  
Signature of Debtor **Thyme Lewis**

**X**  
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

**November 2, 2010**  
Date

**Signature of Attorney\***

**X /s/ Giovanni Orantes**  
Signature of Attorney for Debtor(s)

**Giovanni Orantes 190060**  
Printed Name of Attorney for Debtor(s)

**Orantes Law Firm, P.C**  
Firm Name  
**3435 Wilshire Blvd., Suite 1980**  
**Los Angeles, CA 90010**

Address

**Email: go@gobklaw.com**  
**(213) 389-4362 Fax: (877) 789-5776**

Telephone Number

**November 2, 2010**                      **190060**  
Date

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

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

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

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

**X**  
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**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.

**X**  
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

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

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

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

Social-Security number (If the 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

**X**  
Date

Date

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

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

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

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

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

**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis

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.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

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

4. I am not required to receive a credit counseling briefing because of: *[Check the 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/ Thyme Lewis  
Thyme Lewis

Date: November 2, 2010

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis  
Debtor(s)

Case No. \_\_\_\_\_  
Chapter 11

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

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

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
<b>Bac Home Loans Servicing 450 American St Simi Valley, CA 93065</b>	<b>Bac Home Loans Servicing 450 American St Simi Valley, CA 93065</b>	<b>Single Family Residence located at 29090 Robinson Canyon Rd., Carmel, CA 93923-8021</b>	<b>Contingent Unliquidated</b>	<b>1,338,971.00  (700,000.00 secured)</b>
<b>Bank Of America Attn: Bankruptcy NC4-105-02-99 Po Box 26012 Greensboro, NC 27410</b>	<b>Bank Of America Attn: Bankruptcy NC4-105-02-99 Po Box 26012 Greensboro, NC 27410</b>	<b>ChargeAccount</b>	<b>Contingent Unliquidated</b>	<b>54,329.00</b>
<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195</b>	<b>Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195</b>	<b>CreditCard</b>	<b>Contingent Unliquidated</b>	<b>31,025.00</b>
<b>Citibank Usa Attn.: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>Citibank Usa Attn.: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195</b>	<b>ChargeAccount</b>	<b>Contingent Unliquidated</b>	<b>19,536.00</b>
<b>Marin Water Municipal District 220 Nellen Avenue Corte Madera, CA 94925</b>	<b>Marin Water Municipal District 220 Nellen Avenue Corte Madera, CA 94925</b>	<b>water bill for foreclosed home located at 82 central ave., venice beach, ca 90291</b>	<b>Contingent Unliquidated Disputed</b>	<b>1,184.06</b>
<b>Richard Allan Burger 17 Keller St Petaluma, CA 94952</b>	<b>Richard Allan Burger 17 Keller St Petaluma, CA 94952</b>	<b>Attorney for Kathleen E Kalbfleisch Trust case no.710410</b>	<b>Contingent Unliquidated</b>	<b>5,120.00  (0.00 secured)</b>
<b>Santa Monica Enterprises, Inc. 501 SANTA MONICA BLVD STE 506 Santa Monica, CA 90401</b>	<b>Santa Monica Enterprises, Inc. 501 SANTA MONICA BLVD STE 506 Santa Monica, CA 90401</b>	<b>Single Family Residence located at 29090 Robinson Canyon Rd., Carmel, CA 93923-8021 Deed of Trust is held by John McComas</b>	<b>Contingent Unliquidated</b>	<b>32,618.00 (700,000.00 secured) (1,338,971.00 senior lien)</b>



**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis  
Debtor

Case No. \_\_\_\_\_

Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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**None**

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

I, the of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date November 2, 2010

Signature /s/ Thyme Lewis  
**Thyme Lewis**  
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.



**STATEMENT OF RELATED CASES**  
**INFORMATION REQUIRED BY LOCAL BANKRUPTCY RULE 1015-2**  
**UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None.**

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None.**

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None.**

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None.**

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Los Angeles, California.

/s/ Thyme Lewis

Dated November 2, 2010

Thyme Lewis

Debtor

Joint Debtor

Name: Giovanni Orantes 190060  
Address: 3435 Wilshire Blvd., Suite 1980  
Los Angeles, CA 90010  
Telephone: (213) 389-4362 Fax: (877) 789-5776

- Attorney for Debtor  
 Debtor in Pro Per

<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
List all names including trade names, used by Debtor(s) within last 8 years:  <b>Thyme Lewis</b>	Case No.:  <div style="text-align: center;"><b>NOTICE OF AVAILABLE CHAPTERS</b>  (Notice to Individual Consumer Debtor Under § 342(b) of the Bankruptcy Code)</div>

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)**

- 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.
- 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.
- 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.

- 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)**

- 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.
- 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.
- 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 the Debtor**

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

Thyme Lewis  
Printed Name(s) of Debtor(s)

X /s/ Thyme Lewis  
Signature of Debtor

November 2, 2010  
Date

Case No. (if known) \_\_\_\_\_

X \_\_\_\_\_  
Signature of Joint Debtor (if any) Date

**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$700,000.00		
B - Personal Property	Yes	4	\$45,064.25		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		\$1,376,709.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$106,074.06	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$9,944.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$9,935.00
<b>TOTAL</b>		17	\$745,064.25	\$1,482,783.06	

**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis

Debtor(s)

Case No.

Chapter

11

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>\$0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>\$0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	<b>\$0.00</b>
Student Loan Obligations (from Schedule F)	<b>\$0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>\$0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>\$0.00</b>
TOTAL	<b>\$0.00</b>

State the following:

Average Income (from Schedule I, Line 16)	<b>\$9,944.00</b>
Average Expenses (from Schedule J, Line 18)	<b>\$9,935.00</b>
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20 )	<b>\$1,289.14</b>

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		<b>\$676,709.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	<b>\$0.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		<b>\$0.00</b>
4. Total from Schedule F		<b>\$106,074.06</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		<b>\$782,783.06</b>

In re Thyme Lewis, Debtor Case No. \_\_\_\_\_

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Single Family Residence located at 29090 Robinson Canyon Rd., Carmel, CA 93923-8021	Fee simple	-	700,000.00	1,371,589.00

Sub-Total > **700,000.00** (Total of this page)

Total > **700,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply 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).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		<b>Cash on hand</b>	-	<b>200.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Checking account ending in x6910 held by Bank of America</b>	-	<b>11,257.21</b>
		<b>Checking account ending in x9438 held by Bank of America</b>	-	<b>348.97</b>
		<b>Savings account ending in x0523 held by Bank of America</b>	-	<b>558.07</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>2 couches, 1 desk, 6 chairs, 2 tables, 2 radios, 2 televisions, 2 DVD players, 2 armoires, 1 breakfast table, 2 lamps, 1 set of china, 1 set of silverware, 1 bed, 1 dresser, 3 mirrors, 1 computer, 1 microwave, 1 refrigerator, set of dishes, set of cookware, 4 bar stools, 1 bar, 1 coffee maker, 1 vacuum cleaner, 1 iron, 1 electric drill, painting supplies and bacis tools; each item of which has a value of \$550 or less. Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>2,000.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>1 old record collection Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>3,000.00</b>
		<b>Assorted books with no value Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>0.00</b>
		<b>1993 BMW 325 IS with approx. 200,000 miles</b>	-	<b>0.00</b>
			Sub-Total >	<b>17,364.25</b>
			(Total of this page)	

3 continuation sheets attached to the Schedule of Personal Property

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
6. Wearing apparel.		<b>Wearing apparel for debtor; each item of which has a value of \$550 or less. Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>5,000.00</b>
7. Furs and jewelry.		<b>1 Silver and 1 Platinum ring Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>500.00</b>
8. Firearms and sports, photographic, and other hobby equipment.		<b>1 shot gun Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>300.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
			Sub-Total >	<b>5,800.00</b>
			(Total of this page)	

Sheet 1 of 3 continuation sheets attached to the Schedule of Personal Property



In re Thyme Lewis, Debtor Case No. \_\_\_\_\_

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	NON E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		<b>Lawsuit against Jeffrey Orrisch (Judgment is for \$6,000 but collection is dubious)</b>	-	<b>Unknown</b>
		<b>Lawsuit against Noble and Wolford (Judgment is for \$10,000 but collection is dubious)</b>	-	<b>Unknown</b>
22. Patents, copyrights, and other intellectual property. Give particulars.		<b>3 Scripts: Boys of Big Sur, Thorn on the Mountain, Happy Wednesday.</b>	-	<b>10,000.00</b>
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>1966 Mercedes benz 230SL with approx. 280,000 miles Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>6,000.00</b>
		<b>2007 Yamaha R6 with approximately ___ miles Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>4,500.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
			Sub-Total >	<b>20,500.00</b>
			(Total of this page)	

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

In re Thyme Lewis, Debtor Case No. \_\_\_\_\_

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
28. Office equipment, furnishings, and supplies.		<b>Computer and printer Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>600.00</b>
29. Machinery, fixtures, equipment, and supplies used in business.		<b>power tools, Table saw, chain saw, power saw Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778</b>	-	<b>800.00</b>
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			

Sub-Total >	<b>1,400.00</b>
(Total of this page)	
Total >	<b>45,064.25</b>

(Report also on Summary of Schedules)

Sheet 3 of 3 continuation sheets attached to the Schedule of Personal Property

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>Cash on Hand</b>			
Cash on hand	C.C.P. § 703.140(b)(5)	200.00	200.00
<b>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</b>			
Checking account ending in x6910 held by Bank of America	C.C.P. § 703.140(b)(5)	11,257.21	11,257.21
Checking account ending in x9438 held by Bank of America	C.C.P. § 703.140(b)(5)	348.97	348.97
Savings account ending in x0523 held by Bank of America	C.C.P. § 703.140(b)(5)	558.07	558.07
<b>Household Goods and Furnishings</b>			
2 couches, 1 desk, 6 chairs, 2 tables, 2 radios, 2 televisions, 2 DVD players, 2 armoires, 1 breakfast table, 2 lamps, 1 set of china, 1 set of silverware, 1 bed, 1 dresser, 3 mirrors, 1 computer, 1 microwave, 1 refrigerator, set of dishes, set of cookware, 4 bar stools, 1 bar, 1 coffee maker, 1 vacuum cleaner, 1 iron, 1 electric drill, painting supplies and bacis tools; each item of which has a value of \$550 or less. Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(3)	2,000.00	2,000.00
<b>Books, Pictures and Other Art Objects; Collectibles</b>			
1 old record collection Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(5)	3,000.00	3,000.00
<b>Wearing Apparel</b>			
Wearing apparel for debtor; each item of which has a value of \$550 or less. Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(3)	5,000.00	5,000.00
<b>Furs and Jewelry</b>			
1 Silver and 1 Platinum ring Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(4)	500.00	500.00
<b>Firearms and Sports, Photographic and Other Hobby Equipment</b>			
1 shot gun Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(5)	300.00	300.00
<b>Automobiles, Trucks, Trailers, and Other Vehicles</b>			
1966 Mercedes benz 230SL with approx. 280,000 miles Location: 15 Catamaran Street Apt. 3, Marina Del Rey CA 90292-5778	C.C.P. § 703.140(b)(2) C.C.P. § 703.140(b)(5)	3,525.00 2,475.00	6,000.00

In re Thyme Lewis, Debtor Case No. \_\_\_\_\_

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**  
(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>2007 Yamaha R6 with approximately ___ miles</b> <b>Location: 15 Catamaran Street Apt. 3, Marina</b> <b>Del Rey CA 90292-5778</b>	<b>C.C.P. § 703.140(b)(5)</b>	<b>4,500.00</b>	<b>4,500.00</b>
<b><u>Office Equipment, Furnishings and Supplies</u></b> <b>Computer and printer</b> <b>Location: 15 Catamaran Street Apt. 3, Marina</b> <b>Del Rey CA 90292-5778</b>	<b>C.C.P. § 703.140(b)(3)</b>	<b>600.00</b>	<b>600.00</b>
<b><u>Machinery, Fixtures, Equipment and Supplies Used in Business</u></b> <b>power tools, Table saw, chain saw, power saw</b> <b>Location: 15 Catamaran Street Apt. 3, Marina</b> <b>Del Rey CA 90292-5778</b>	<b>C.C.P. § 703.140(b)(6)</b>	<b>800.00</b>	<b>800.00</b>

Total: **35,064.25** **35,064.25**

B6D (Official Form 6D) (12/07)

In re Thyme Lewis  
Debtor

Case No. \_\_\_\_\_

### 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 a creditor, 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" 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" 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.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN							
Account No. <b>xxxxx9027</b>		<b>Opened 9/01/06 Last Active 6/24/10</b>							
<b>Bac Home Loans Servicing 450 American St Simi Valley, CA 93065</b>	-	<b>Single Family Residence located at 29090 Robinson Canyon Rd., Carmel, CA 93923-8021</b>			X	X		<b>1,338,971.00</b>	<b>638,971.00</b>
		Value \$ <b>700,000.00</b>							
Account No. <b>N/A</b>		<b>7/11/2007</b>							
<b>Richard Allan Burger 17 Keller St Petaluma, CA 94952</b>	-	<b>Judgment Lien Attorney for Kathleen E Kalbfleisch Trust case no.710410</b>			X	X		<b>5,120.00</b>	<b>5,120.00</b>
		Value \$ <b>0.00</b>							
Account No. <b>xxxx2509</b>		<b>January 2007</b>							
<b>Santa Monica Enterprises, Inc. 501 SANTA MONICA BLVD STE 506 Santa Monica, CA 90401</b>	-	<b>Deed of Trust Single Family Residence located at 29090 Robinson Canyon Rd., Carmel, CA 93923-8021 Deed of Trust is held by John McComas</b>			X	X		<b>32,618.00</b>	<b>32,618.00</b>
		Value \$ <b>700,000.00</b>							
Account No.									
		Value \$							
Subtotal (Total of this page)								<b>1,376,709.00</b>	<b>676,709.00</b>
Total (Report on Summary of Schedules)								<b>1,376,709.00</b>	<b>676,709.00</b>

0 continuation sheets attached

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor

## 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 \$11,725\* 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 \$5,775\* 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 \$2,600\* 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).

\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/10) - Cont.

In re Thyme Lewis  
Debtor

Case No. \_\_\_\_\_

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

**Taxes and Certain Other Debts  
Owed to Governmental Units**

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D I S P U T E D	U N L I Q U I D A T E D	C O N T I N G E N T	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. <b>0516</b>  <b>Franchise Tax Board Bankruptcy Unit PO Box 2952 Sacramento, CA 95812</b>		-				X X	0.00	0.00
Account No. <b>0516</b>  <b>Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114</b>		-				X X	0.00	0.00
Account No. <b>xxxxx5009</b>  <b>Monterey County Tax Collector Post Office Box 891 Salinas, CA 93902</b>		-	taxes owed for 29090 robinson canyon road, carmel, ca 93923			X X	0.00	0.00
Account No.								
Account No.								
Subtotal (Total of this page)							0.00	0.00
Total (Report on Summary of Schedules)							0.00	0.00

Sheet 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re Thyme Lewis, Case No. \_\_\_\_\_  
Debtor

**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 claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H	W				
Account No. <b>8558</b>  <b>Bank Of America</b> <b>Attn: Bankruptcy NC4-105-02-99</b> <b>Po Box 26012</b> <b>Greensboro, NC 27410</b>	-						<b>54,329.00</b>
Account No. <b>xxxx-xxxx-xxxx-9189</b>  <b>Citibank Sd, Na</b> <b>Attn: Centralized Bankruptcy</b> <b>Po Box 20507</b> <b>Kansas City, MO 64195</b>	-			X	X		<b>31,025.00</b>
Account No. <b>xxxxxxxxxxxx6042</b>  <b>Citibank Usa</b> <b>Attn.: Centralized Bankruptcy</b> <b>Po Box 20363</b> <b>Kansas City, MO 64195</b>	-			X	X		<b>19,536.00</b>
Account No. <b>xxx9792</b>  <b>Marin Water Municipal District</b> <b>220 Nellen Avenue</b> <b>Corte Madera, CA 94925</b>	-			X	X	X	<b>1,184.06</b>
Subtotal (Total of this page)							<b>106,074.06</b>

1 continuation sheets attached



B6F (Official Form 6F) (12/07) - Cont.

In re Thyme Lewis Case No. \_\_\_\_\_  
Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No. <b>xxxxxx4381</b>  <b>Wachovia</b> <b>4101 Wiseman Blvd</b> <b>San Antonio, TX 78251</b>			<b>4/2007</b> <b>Foreclosure</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>0.00</b>	
Account No.								
Account No.								
Account No.								
Account No.								
Sheet no. <u>1</u> of <u>1</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	<b>0.00</b>
							Total (Report on Summary of Schedules)	<b>106,074.06</b>

In re Thyme Lewis, Case No. \_\_\_\_\_  
Debtor

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
--	--

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor

### SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or 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).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

\_\_\_\_\_ continuation sheets attached to Schedule of Codebtors

B6I (Official Form 6I) (12/07)

In re Thyme Lewis

Case No. \_\_\_\_\_

Debtor(s)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: <b>Single</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>None.</b>	AGE(S):
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>Actor</b>	
Name of Employer	<b>Entertainment Partners</b>	
How long employed	<b>1 years</b>	
Address of Employer	<b>2835 North Naomi Street Burbank, CA 91504</b>	

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)
2. Estimate monthly overtime

	DEBTOR	SPOUSE
1.	\$ <b>3,094.00</b>	\$ <b>N/A</b>
2.	\$ <b>0.00</b>	\$ <b>N/A</b>

3. SUBTOTAL

\$ <b>3,094.00</b>	\$ <b>N/A</b>
--------------------	---------------

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <b>0.00</b>	\$ <b>N/A</b>
----------------	---------------

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <b>3,094.00</b>	\$ <b>N/A</b>
--------------------	---------------

7. Regular income from operation of business or profession or farm (Attach detailed statement)
8. Income from real property
9. Interest and dividends
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above
11. Social security or government assistance (Specify): \_\_\_\_\_
12. Pension or retirement income
13. Other monthly income (Specify): \_\_\_\_\_

\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>6,850.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>
\$ <b>0.00</b>	\$ <b>N/A</b>

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <b>6,850.00</b>	\$ <b>N/A</b>
--------------------	---------------

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ <b>9,944.00</b>	\$ <b>N/A</b>
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ <b>9,944.00</b>	
--------------------	--

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

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

In re Thyme Lewis

Debtor(s)

Case No. \_\_\_\_\_

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)		\$	<u>2,440.00</u>
a. Are real estate taxes included?	Yes <u>    </u> No <u>X</u>		
b. Is property insurance included?	Yes <u>    </u> No <u>X</u>		
2. Utilities:		\$	<u>80.00</u>
a. Electricity and heating fuel		\$	<u>0.00</u>
b. Water and sewer		\$	<u>60.00</u>
c. Telephone		\$	<u>0.00</u>
d. Other _____		\$	<u>0.00</u>
3. Home maintenance (repairs and upkeep)		\$	<u>0.00</u>
4. Food		\$	<u>250.00</u>
5. Clothing		\$	<u>0.00</u>
6. Laundry and dry cleaning		\$	<u>60.00</u>
7. Medical and dental expenses		\$	<u>60.00</u>
8. Transportation (not including car payments)		\$	<u>230.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	<u>250.00</u>
10. Charitable contributions		\$	<u>250.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		\$	<u>0.00</u>
a. Homeowner's or renter's		\$	<u>0.00</u>
b. Life		\$	<u>0.00</u>
c. Health		\$	<u>0.00</u>
d. Auto		\$	<u>140.00</u>
e. Other _____		\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____		\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)			
a. Auto		\$	<u>0.00</u>
b. Other _____		\$	<u>0.00</u>
c. Other _____		\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others		\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home		\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	<u>0.00</u>
17. Other <b>See Detailed Expense Attachment</b>		\$	<u>6,115.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		\$	<b><u>9,935.00</u></b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:			
20. STATEMENT OF MONTHLY NET INCOME			
a. Average monthly income from Line 15 of Schedule I		\$	<u>9,944.00</u>
b. Average monthly expenses from Line 18 above		\$	<u>9,935.00</u>
c. Monthly net income (a. minus b.)		\$	<u>9.00</u>

B6J (Official Form 6J) (12/07)

In re Thyme Lewis

Debtor(s)

Case No. \_\_\_\_\_

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**  
**Detailed Expense Attachment**

**Other Expenditures:**

<b>Support to Mom</b>	<b>\$</b>	<b>200.00</b>
<b>Personal Grooming (for acting career)</b>	<b>\$</b>	<b>100.00</b>
<b>Mortgage</b>	<b>\$</b>	<b>5,800.00</b>
<b>Utilities for rental home</b>	<b>\$</b>	<b>15.00</b>
<b>Total Other Expenditures</b>	<b>\$</b>	<b>6,115.00</b>

**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

**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 19 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date November 2, 2010

Signature /s/ Thyme Lewis

Thyme Lewis

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.

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Central District of California

In re Thyme Lewis

Debtor(s)

Case No.

Chapter 11

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None [ ]

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Table with 2 columns: AMOUNT and SOURCE. Rows include 2009: Debtor Employment Income (\$6,561.00), 2008: Debtor Employment Income (\$1,035.00), and 2010 YTD: Debtor Employment Income (\$11,086.00).



**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$42,300.00</b>	<b>2009: Debtor Rental Income</b>
<b>\$23,000.00</b>	<b>2008: Debtor Self-employment</b>
<b>\$97,800.00</b>	<b>2008: Debtor Rental Income</b>

**3. Payments to creditors**

None  **Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None  b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
<b>Bank Of America 4161 Piedmont Parkway Greensboro, NC 27410</b>	<b>June 16, 2010</b>	<b>\$1,000.00</b>	<b>\$4,858.44</b>

None  c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None  a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>Thyme Lewis (Plaintiff) vs. Michelle Wolford and Adam Noble (Defendants) Case No. CIV 1002176</b>	<b>Collection</b>	<b>Superior Court of the State of California County of Marin Unlimited Civil Jurisdiction</b>	<b>Settled</b>
<b>Thyme Lewis (Plaintiff) vs. (defendant) Case No. 9HY03366</b>	<b>Criminal</b>	<b>Superior Court of California, County of Marin 351 Civic Center Drive- Rm 113 P.O. Box 4988 San Rafael, CA 94913-4988</b>	<b>Pending</b>
<b>Thyme Lewis (Plaintiff) vs. Jeffrey Orrisch (Defendant) Case No. SMC1010576</b>	<b>Collection</b>	<b>Superior Court of California County of Marin</b>	<b>Judgment</b>
<b>Kathleen E Kalbfleisch Trust (Plaintiff) vs. Thyme Lewis (defendant) Docket No. 710410</b>	<b>Collection</b>	<b>Superior Court of California Conuty of Marin</b>	<b>Judgment</b>

None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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**5. Repossessions, foreclosures and returns**

None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
<b>Wachovia 4101 Wiseman Blvd. #Mc-t San Antonio, TX 78251</b>	<b>April 2010</b>	<b>SFR located at 82 Central Avenue, Saucelito CA 94965-2312 value is unknown</b>

**6. Assignments and receiverships**

None  a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

None  List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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**8. Losses**

None  List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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**9. Payments related to debt counseling or bankruptcy**

None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**10. Other transfers**

None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None  b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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**11. Closed financial accounts**

None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
Bank Of America 4161 Piedmont Parkway Greensboro, NC 27410	Checking account ending in x0084	Account was closed with a zero balance on January 30, 2010

**12. Safe deposit boxes**

None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None  If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

None  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None  a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18 . Nature, location and name of business**

- None  a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Thyme Lewis	0516	15 Catamaran St., # 3 Marina Del Rey, CA 90292	Home remodeling	1/2004-12/2009

- None  b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

**19. Books, records and financial statements**

- None  a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
<b>H&amp;B Block</b> <b>8370 Wilshire blvd., Ste. 100</b> <b>Beverly Hills, CA 90211</b>	<b>12/2008-present</b>

- None  b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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- None  c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
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- None  d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
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**20. Inventories**

- None  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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- None  b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
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**21. Current Partners, Officers, Directors and Shareholders**

- None  a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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- None  b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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**22 . Former partners, officers, directors and shareholders**

None  a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None  b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

**23 . Withdrawals from a partnership or distributions by a corporation**

None  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

**24. Tax Consolidation Group.**

None  If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION TAXPAYER IDENTIFICATION NUMBER (EIN)

**25. Pension Funds.**

None  If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 2, 2010

Signature /s/ Thyme Lewis  
**Thyme Lewis**  
Debtor

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

<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
In re  <b>Thyme Lewis</b>   Debtor.	Case No.:   <p style="text-align: center;"><b>DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR</b></p>

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 .....	\$ <u>Undetermined</u>
Prior to the filing of this statement I have received .....	\$ <u>10,000.00</u>
Balance Due .....	\$ <u>Undetermined</u>

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. [Other provisions as needed]

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

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**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.

September 17, 2010  
Date

/s/ Giovanni Orantes  
**Giovanni Orantes 190060**  
 Signature of Attorney  
Orantes Law Firm, P.C  
 Name of Law Firm  
**3435 Wilshire Blvd., Suite 1980**  
**Los Angeles, CA 90010**  
**(213) 389-4362 Fax: (877) 789-5776**



**United States Bankruptcy Court  
Central District of California**

In re Thyme Lewis

Debtor(s)

Case No.

Chapter 11

**DEBTOR'S CERTIFICATION OF EMPLOYMENT INCOME  
PURSUANT TO 11 U.S.C. § 521 (a)(1)(B)(iv)**

Please fill out the following blank(s) and check the box next to one of the following statements:

I, Thyme Lewis, the debtor in this case, declare under penalty of perjury under the laws of the United States of America that:

- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
*(NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.)*
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

I, \_\_, the debtor in this case, declare under penalty of perjury under the laws of the United States of America that:

- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
*(NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.)*
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

Date November 2, 2010

Signature /s/ Thyme Lewis

Thyme Lewis

Debtor



EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: EPSC  
 Wage Request: 2835 N NAOMI ST  
 BURBANK, CA 91504  
 Telephone: (818) 955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81125120  
 Check Date 09/13/2010  
 Invoice No ECA 04175231  
 EP Reference 00052903/MV60E9

Tax Name	Tax ID
THYME LEWIS	***-**-0516
Prod Comp: FTP PRODUCTIONS LLC	

MAILING ADDRESS: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292 \* PLEASE VERIFY ADDRESS \*  
 \* mail or fax corrections \*  
 -fax no: (818) 948-9254

	State	Federal
Marital Status	S	S
Dependents	00	00
Add'l W/H	EXEMPT	EXEMPT
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NONE	NONE	
Last Date Worked	Pay Period	
09/08/2010	From 09/08/2010	
	To 09/08/2010	
Union	AFTP	
GENERAL - EXTRA		

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	18.0000	8.0	144.00	FED		445.31			
SMOKE			14.00	FICA-SSA	10.26	506.71			
MEAL P			7.50	FICA-MED	2.40	118.50			
				VPDI CA	1.82	89.90			
				RES ST CA		233.35			
<b>Total Hrs/Gross 8.0 165.50</b>				<b>Total 14.48 1,393.77</b>			<b>Total 0.00 0.00</b>		
<b>Total Net 151.02</b>				<b>Comments: NO ORDINARY FAMILY</b>					
<b>Subject FIT 165.50</b>									
<b>YTD Payments 8,172.71</b>									
<b>YTD Subj FIT 8,172.71</b>									

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND.

In Cooperation with & Payable If Desired at  
BANK OF AMERICA, N.A. 81125120

64-1278/611

NO ORDINARY FAMILY

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81125120	09/13/2010	-C7qacPP60	-opl4V10Xv

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED FIFTY ONE DOLLARS AND 02 CENTS

PAY EXACTLY \*\*\*\*\*151.02

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark L. Hellet*  
President  
Richard Douglas  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: EPSC  
 Wage Request: 2835 N NAOMI ST  
 BURBANK, CA 91504  
 Telephone: (818) 955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

Check Date 09/09/2010  
 Invoice No ECA 04173976  
 EP Reference 00C50147/MV3879

81104292

Tax Name	Tax ID
THYME LEWIS	***-**-0516
Prod Comp: CBS TELEVISION	
MAILING ADDRESS: THYME LEWIS 15 CATAMARAN ST #3 MARINA DEL REY, CA 90292	
W-2 or 1099 Address 15 CATAMARAN ST #3 MARINA DEL REY, CA 90292	

	State	Federal
Marital Status	S	S
Dependents	00	00
Add'l W/E	EXEMPT	EXEMPT
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NONE	NONE	
Last Date Worked	Pay Period	
09/07/2010	From 09/07/2010 To 09/07/2010	
Union	SAGP	
GENERAL EXTRA		

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	17.3750	8.0	139.00	FED		445.31			
MILEWH			19.80	FICA-SSA	9.85	496.45			
				FICA-MED	2.30	116.10			
				VPDI CA	1.75	88.08			
				RES ST CA		233.35			
<b>Total Hrs/Gross 8.0 158.80</b>				<b>Total 13.90 1,379.29</b>			<b>Total 0.00 0.00</b>		
<b>Total Net 144.90</b>				<b>Comments: NCIS: LOS ANGELES</b>					
<b>Subject FIT 158.80</b>									
<b>YTD Payments 8,007.21</b>									
<b>YTD Subj FIT 8,007.21</b>									

U.S. PATENT 5,823,976 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP AND A WHITE BACKGROUND

In Cooperation with & Payable if Desired at  
**BANK OF AMERICA, N.A.**

81104292

64-1278/611

NCIS: LOS ANGELES

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81104292	09/09/2010	-C7qacPP60	-mIPiF!+W6

BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED FORTY FOUR DOLLARS AND 90 CENTS

PAY EXACTLY \*\*\*\*\*144.90

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Matthew L. Holt*  
 President  
*Richard [Signature]*  
 CFO



EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: EPSC  
 Wage Request: 2835 N NAOMI ST  
 BURBANK, CA 91504  
 Telephone: (818)955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81240563  
 Check Date 09/23/2010  
 Invoice No ECA 04188284  
 EP Reference 00053307/MM8449

**Tax Name** Tax ID  
 THYME LEWIS \*\*\*-\*\*-0516  
 Prod Comp: TURNER NORTH CENTER PRODUCTI  
 MAILING ADDRESS: THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

	State	Federal
Marital Status	S	S
Dependents	02	02
Add'l W/H		
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NONE	NONE	
Last Date Worked	Pay Period	
09/21/2010	From 09/21/2010	To 09/21/2010
Union AFTP GENERAL EXTRA		

W-2 or 1099 Address 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292 \* PLEASE VERIFY ADDRESS \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	18.0000	8.0	144.00	FED	13.06	547.53			
				FICA-SSA	8.92	565.96			
				FICA-MED	2.89	132.36			
				VPDI CA	1.58	100.41			
				RES ST CA	4.16	268.17			
<b>Total Hrs/Gross</b> 8.0 144.00				<b>Total</b> 29.81 1,614.43			<b>Total</b> 0.00 0.00		
<b>Total Net</b> 114.19				<b>Comments:</b> GLORY DAZE					
<b>Subject FIT</b> 144.00									
<b>YTD Payments</b> 9,128.46									
<b>YTD Subj FIT</b> 9,128.46									

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In Cooperation with & Payable if Desired at  
 BANK OF AMERICA, N.A.

81240563  
 64-1278/611

GLORY DAZE

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81240563	09/23/2010	-C7qacPP60	-tvDay!-1t

BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED FOURTEEN DOLLARS AND 19 CENTS

PAY EXACTLY  
 \*\*\*\*\*114.19  
 Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Mark L. Holt*  
 President  
 CFO

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⑈81240563⑈ ⑆061112788⑆ 3299114225⑈



EPSG CENTRAL CASTING  
2835 N. NACMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: EPSG  
 Wage Request: 2835 N NACMI ST  
 BURBANK, CA 91504  
 Telephone: (818)955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81239179  
 Check Date 09/23/2010  
 Invoice No ECA 04187788  
 EP Reference 00033297/MW8001

**Tax Name** Tax ID  
 THYME LEWIS \*\*\*-\*\*-0516

Prod Comp: PARAMOUNT

**MAILING ADDRESS:** THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

\* PLEASE VERIFY ADDRESS \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

	State	Federal
<b>Marital Status</b>	S	S
<b>Dependents</b>	02	02
<b>Add'l W/E</b>		
<b>Resident State</b>	Work State	
CA	CA	
<b>Tax Days</b>	Work Days	
1	1	
<b>Vacation</b>	Holiday	
NONE	NONE	
<b>Last Date Worked</b>	Pay Period	
09/22/2010	From 09/22/2010	
	To 09/22/2010	

Union SAGT  
 TV-GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	17.3750	8.0	139.00	FED	12.31	534.47			
				FICA-SSA	8.62	557.04			
				FICA-MED	2.01	130.27			
				VPDI CA	1.53	98.83			
				RES ST CA	3.81	264.01			
<b>Total Hrs/Gross</b>		8.0	139.00	<b>Total</b>	28.28	1,584.62	<b>Total</b>	0.00	0.00
<b>Total Net</b>			110.72	<b>Comments: N.C.I.S.</b>					
<b>Subject FIT</b>			139.00						
<b>YTD Payments</b>			8,984.46						
<b>YTD Subj FIT</b>			8,984.46						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

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 BANK OF AMERICA, N.A.

81239179  
 64-1278/611

**EP Entertainment Partners**  
 an employee owned company.

EPSG CENTRAL CASTING  
 2835 N. NACMI ST, BURBANK, CA 91504

**N.C.I.S.**

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81239179	09/23/2010	-C7qacPP60	-tvBNJL-1t

BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED TEN DOLLARS AND 72 CENTS

PAY EXACTLY  
 \*\*\*\*\*110.72

VOID AFTER 180 DAYS

PAY TO THE ORDER OF THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Michael S. ...*  
 President  
 CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



EPSC CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

Tax Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: KING STREET PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CENCAST, LLC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone No: (818) 955-6009  
Unemployment State: CA  
St Unemployment No: 292-4009-0

Check Date: 10/05/2010  
Invoice No: BCA 04195525  
EP Reference: 00353375/MX6127

81313460

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H	Exempt	Exempt

Resident State	Work State
CA	CA

Tax Days	Work Days
1	1

Vacation	Holiday
None	None

Last Date Worked	Pay Period
09/29/2010	From 09/29/2010 To 09/29/2010

Union: AFTR GENERAL EXTRA

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED		547.53			
				FICA-SSA	8.93	594.77			
				FICA-MED	2.09	139.10			
				RES ST CA		268.17			
				VPDI CA	1.58	105.52			
<b>Total Hrs/Gross</b>			8.0	<b>Total</b>	12.60	1,655.09	<b>Total</b>	0.00	0.00
<b>Total Net</b>			131.40	<b>Comments: RETIRED AT 35</b>					
<b>Subject FIT</b>			144.00						
<b>YTD Payments</b>			9,593.06						
<b>YTD Subj FIT</b>			9,593.06						

U.S. PATENT 6,828,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



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BANK OF AMERICA, N.A.

81313460

EPSC CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

RETIRED AT 35			
Check No	Check Date	Employee No	Check Code
81313460	10/05/2010	-C7qacPP60	0+fvhK!+SG

64-1278/611  
BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Thirty One Dollars AND 40 Cents

Pay Exactly  
\*\*\*\*\*131.40

Void after 180 days

Pay To The Order Of: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark L. Helbit*  
Richard [Signature]  
Pres. Cent  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK

⑈81313460⑈ ⑆061112788⑆ 3299114225⑈



EPSP CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

Tax Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: KING STREET PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CENCAST, LLC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81313433  
Check Date: 10/05/2010  
Invoice No: BCA 04195522  
EP Reference: 00053375/MX5977

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H	Exempt	Exempt
Resident State CA	Work State CA	
Tax Days 1	Work Days 1	
Vacation None	Holiday None	
Last Date Worked 09/28/2010	Pay Period From 09/28/2010 To 09/28/2010	

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Union:  
AFTR  
GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED		547.53			
				FICA-SSA	8.93	585.84			
				FICA-MED	2.09	137.01			
				RES ST CA		268.17			
				VPDI CA	1.58	103.94			
<b>Total Hrs/Gross</b>		8.0	144.00	<b>Total</b>	12.60	1,642.49	<b>Total</b>	0.00	0.00
<b>Total Net</b>			131.40	<b>Comments: RETIRED AT 35</b>					
<b>Subject FIT</b>			144.00						
<b>YTD Payments</b>			9,449.06						
<b>YTD subj FIT</b>			9,449.06						

U.S. PATENT 5,623,576

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81313433



EPSP CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

RETIRED AT 35

64-1278/621

Check No	Check Date	Employee No	Check Code
81313433	10/05/2010	-C7qacPP60	0+fvft!+SG

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Thirty One Dollars AND 40 Cents

Pay Exactly

\*\*\*\*\*131.40

Void after 180 days

Pay To The Order Of: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Matthew L. Hill*  
President  
*Richard [Signature]*  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK

⑈81313433⑈ ⑆06⑆1⑆1⑆2788⑆ 3299114225⑈



WARNER BROS. TELEVISION,  
a division of WB Studio Enterprises Inc.

Main Document Page 48 of 72

300 Television Plaza  
Burbank, California 91505

Employee's Statement

SOCIAL SECURITY XXX-XX-0516 00		MS	S	EXEMPTIONS	01	LOC	000
NAME LEWIS, THYME				UNION	11	DEPT	0873
ADDRESS 1951 GREENFIELD						CHECK #	
W. LOS ANGELES, CA 90025						767489	
UNITED STATES				PAY PERIOD END		CHECK DATE	
				09/02/2010		09/07/2010	
PRODUCTION	PHOTO START	EPISODE	PRODUCTION NAME	AMOUNT	TAXES		
186017	09/22/86		VOLLEYBALL, ANYONE	.43	DESC	AMOUNT	YTD AMT
					FEDERL	.10	.87
					SOCSEC	.03	.22
					MEDICR		.05
					CA-RES		.22
					CA-ST	.02	.22
					TOTAL	.15	
					DESC	DEDUCTIONS	AMOUNT
					TOTAL		.28
TOTAL GROSS TO DATE				.43			
				3.54	TOTAL NET		

Bank of America NT&SA  
Atlanta, DeKalb County  
Georgia

WARNER BROS. TELEVISION,  
a division of WB Studio Enterprises Inc.

300 Television Plaza  
Burbank, California 91505

Check No. 767489

Date 09/07/2010

64-1278  
611

VOID AFTER 180 DAYS

26,100 DOLLARS

RESIDUALS ACCOUNT

Pay to the order of THYME LEWIS  
1951 GREENFIELD  
W. LOS ANGELES, CA 90025  
767489 000 5100 DRS

WARNING: DO NOT CASH UNLESS YOU CAN SEE A TRUE WATERMARK, VISIBLE FIBERS, MICROPRINTING, HEAT SENSITIVE SECURITY MARK ON THE BACK, AND RED AND BLUE BLENDED INK.

⑈ 767489 ⑈ ⑆061112788⑆ 32991 17210⑈





**WARNER BROS. TELEVISION,**  
a division of WB Studio Enterprises Inc.

300 Television Plaza  
Burbank, California 91505

Employees Statement

SOCIAL SECURITY XXX-XX-0516 00	MS S	EXEMPTIONS 01	LOC 000
NAME LEWIS, THYME	UNION 11		DEPT 0873
ADDRESS 1951 GREENFIELD W. LOS ANGELES, CA 90025 UNITED STATES			CHECK # 760623
PAY PERIOD END 09/01/2010			CHECK DATE 09/03/2010

PRODUCTION	PHOTO START	EPISODE	PRODUCTION NAME	AMOUNT	TAXES		
186017	09/22/86		VOLLEYBALL, ANYONE	3.11	DESC	AMOUNT	YTD AMT
					FEDERL	.77	.77
					SOCSEC	.19	.19
					MEDICR	.05	.05
					CA-RES		.20
					CA-ST	.20	.20
					TOTAL	1.21	
					DESC	DEDUCTIONS	AMOUNT
					TOTAL GROSS TO DATE	3.11	
					TOTAL NET	3.11	1.90

Bank of America NT&SA  
Atlanta, Dekalb County  
Georgia



**WARNER BROS. TELEVISION,**  
a division of WB Studio Enterprises Inc.

300 Television Plaza  
Burbank, California 91505

Check No. 760623

Date 09/03/2010

64-1278  
811

VOID AFTER 180 DAYS

\$1.90

ONE AND 90/100 DOLLARS

RESIDUALS ACCOUNT

Pay to the order of  
THYME LEWIS  
1951 GREENFIELD  
W. LOS ANGELES, CA 90025  
760623 000 5100 DRS

*[Signature]*  
*[Signature]*

WARNING: DO NOT CASH UNLESS YOU CAN SEE A TRUE WATERMARK, VISIBLE FIBERS, MICROPRINTING, HEAT SENSITIVE SECURITY MARK ON THE BACK, AND RED AND BLUE BLENDED INK.

⑈ 760623 ⑈ ⑆061112788⑆ 32991⑈17210⑈

**WARNER BROS. TELEVISION,**  
a division of WB Studio Enterprises Inc.

300 Television Plaza  
Burbank, California 91505

Employees Statement

SOCIAL SECURITY XXX-XX-0516 01		MS	\$	EXEMPTIONS 00	LOC 000		
NAME FSO LEWIS, THYME					UNION 09	DEPT 0873	CHECK # 756832
ADDRESS 9300 WILSHIRE BLVD. % I.SCHECTER CO. #400 BEVERLY HILLS,, CA 90212 UNITED STATES		#95-4428691					CHECK DATE 09/03/2010
		PAY PERIOD END 09/01/2010					
PRODUCTION	PHOTO START	EPISODE	PRODUCTION NAME	AMOUNT	TAXES		
225655	09/21/99		THE TROUBLE W/ANGELS(4 U	.40	DESC	AMOUNT	YTD AMT
225655	09/21/99		THE TROUBLE W/ANGELS(4 U	15.85			
					TOTAL		
					DESC	DEDUCTIONS	AMOUNT
TOTAL GROSS TO DATE				16.25	TOTAL NET		16.25
				47.02			

Bank of America NT&SA  
Atlanta, DeKalb County  
Georgia



**WARNER BROS. TELEVISION,**  
a division of WB Studio Enterprises Inc.

300 Television Plaza  
Burbank, California 91505

Check No. 756832

Date 09/03/2010

64-1278  
611

VOID AFTER 180 DAYS

\$16.25

SIXTEEN AND 25/100 DOLLARS

RESIDUALS ACCOUNT

Pay to the order of  
THRIVE INC.  
FSO THYME LEWIS  
9300 WILSHIRE BLVD.  
% I.SCHECTER CO. #400  
BEVERLY HILLS,, CA 90212  
756832 000 5100 DRS

*[Signature]*  
*[Signature]*

WARNING: DO NOT CASH UNLESS YOU CAN SEE A TRUE WATERMARK, VISIBLE FIBERS, MICROPRINTING, HEAT SENSITIVE SECURITY MARK ON THE BACK, AND RED AND BLUE BLENDED INK.

⑈ 756832⑈ ⑆061112788⑆ 32991⑈ 17210⑈



EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

Tax Name	Tax ID
THYME LEWIS	***-**-0516

Prod Comp: CBS PRODUCTIONS

MAILING ADDRESS: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

**Unemployment Data:**  
Employer: EPSC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone: (818) 955-5000  
Unemployment State: CA  
St Unemployment No: 292-4009-0  
**Claim Filing Instructions:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81137733  
Check Date 09/14/2010  
Invoice No ECA 04177876  
RF Reference 00052879/MV7931

Marital Status	S	S
Dependents	C2	02
Add'l W/H		
Resident State	CA	Work State CA
Tax Days	1	Work Days 1
Vacation	NONE	Holiday NONE
Last Date Worked	09/10/2010	Pay Period From 09/10/2010 To 09/10/2010
Union	AFTR GENERAL EXTRA	

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	14.0000	8.0	112.00	FED	9.76	455.07			
AFWARD			10.00	FICA-SSA	7.56	514.27			
				FICA-MED	1.77	120.27			
				VPDI CA	1.34	91.24			
				RES ST CA	2.65	236.00			
<b>Total Hrs/Gross</b>		8.0	122.00	<b>Total</b>	23.08	1,416.85	<b>Total</b>	0.00	0.00
<b>Total Net</b>			98.92	<b>Comments: 90210</b>					
Subject FIT			122.00						
YTD Payments			8,294.71						
YTD Subj FIT			8,294.71						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP. NOTE WHITE BACKGROUND.

In Cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A. 81137733

90210 64-1278/611

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81137733	09/14/2010	-C7qacPP60	-pKfd813gg

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

PAY EXACTLY NINETY EIGHT DOLLARS AND 92 CENTS

PAY EXACTLY  
\*\*\*\*\*98.92

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Michael S. Holt*  
President  
CFO



EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

Tax Name: THYME LEWIS  
Tax ID: \*\*\*-\*\*-0516

Prod Comp: MONTROSE PRODUCTIONS INC

MAILING ADDRESS: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

**Unemployment Data:**  
Employer: EPSC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone: (818)955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81161332  
Check Date: 09/15/2010  
Invoice No: BCA 04178019  
BP Reference: 00053192/MV8586

	State	Federal
Marital Status	S	S
Dependents	02	02
Add'l W/H		
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NONE	NONE	
Last Date Worked	Pay Period	
09/13/2010	From 09/13/2010	To 09/13/2010
Union AFTR		
GENERAL EXTRA		

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	18.0000	8.0	144.00	FED	13.06	468.13			
				FICA-SSA	8.93	523.20			
				FICA-MED	2.09	122.36			
				VEDI CA	1.59	92.83			
				RES ST CA	4.16	240.16			
<b>Total Hrs/Gross</b> 8.0 144.00				<b>Total</b> 29.83 1,446.68			<b>Total</b> 0.00 0.00		
<b>Total Net</b> 114.17				<b>Comments:</b> RULES OF ENGAGEMENT					
<b>Subject FIT</b> 144.00									
<b>YTD Payments</b> 8,438.71									
<b>YTD Subj FIT</b> 8,438.71									

U.S. PATENT 5,823,976 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND.



In Cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81161332

EPSC CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504



RULES OF ENGAGEMENT			
CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81161332	09/15/2010	-C7qacPP60	-prqpl!0-J

64-1278/611

BANK OF AMERICA  
CENTURY CITY  
2009 CENTURY PARK EAST  
LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED FOURTEEN DOLLARS AND 17 CENTS

PAY EXACTLY

\*\*\*\*\*114.17

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Matthew L. Hellet*  
President  
*Richard [Signature]*  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK.



EPSP CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: EFSG  
 Wage Request: 2835 N NAOMI ST  
 BURBANK, CA 91504  
 Telephone: (818)955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81178580  
 Check Date 09/17/2010  
 Invoice No BCA 04183102  
 EP Reference 00030730/MW3086

Tax Name	Tax ID
THYME LEWIS	***-**-0516

Prod Comp: CBS PRODUCTIONS

MAILING ADDRESS: THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

\* PLEASE VERIFY ADDRESS \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

	State	Federal
Marital Status	S	S
Dependents	02	02
Add'l W/H		
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NCNE	NONE	
Last Date Worked	Pay Period	
09/14/2010	From 09/14/2010	
	To 09/14/2010	

Union SAGT  
 TV-GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	17.3750	8.0	139.00	FED	41.72	509.85			
O.T.	28.6875	4.0	114.75	FICA-SSA	16.60	539.80			
SMOKE			14.00	FICA-MED	3.88	126.24			
				VPDI CA	2.94	95.77			
				RES ST CA	16.23	256.39			
<b>Total Hrs/Gross</b>		12.0	267.75	<b>Total</b>	81.37	1,528.05	<b>Total</b>	0.00	0.00
<b>Total Net</b>			186.38	<b>Comments: CSI MIAMI</b>					
Subject FIT			267.75						
YTD Payments			8,706.46						
YTD Subj FIT			8,706.46						

U.S. PATENT 5,823,576

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In Cooperation with & Payable if Desired at  
 BANK OF AMERICA, N.A.



EPSP CENTRAL CASTING  
 2835 N. NAOMI ST, BURBANK, CA 91504



CSI MIAMI			
CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81178580	09/17/2010	-C7qacPP60	-qpdSP1-CV

81178580

64-1278/611

BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED EIGHTY SIX DOLLARS AND 38 CENTS

PAY EXACTLY

\*\*\*\*\*186.38

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Mark L. Hellet*  
 President  
*Richard Vaughan*  
 CFO

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⑈81178580⑈ ⑆061112788⑆ 3299114225⑈



RPSG CENTRAL CASTING  
2835 N. NAOMI ST, BURBANK, CA 91504

**Unemployment Data:**  
 Employer: RPSG  
 Wage Request: 2835 N NAOMI ST  
 BURBANK, CA 91504  
 Telephone: (818) 955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0  
**Claim Filing Instructions:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

81187385  
 Check Date 09/20/2010  
 Invoice No ECA 04183449  
 EP Reference 00037338/MW3739

**Tax Name** Tax ID  
 THYME LEWIS \*\*\*-\*\*-0516

Prod Comp: 20TH CENTURY FOX

MAILING THYME LEWIS  
 ADDRESS: 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

W-2 or 1099 Address 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

\* PLEASE VERIFY ADDRESS \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

	State	Federal
Marital Status	S	S
Dependents	02	02
Add'l W/E		
Resident State	Work State	
CA	CA	
Tax Days	Work Days	
1	1	
Vacation	Holiday	
NONE	NONE	
Last Date Worked	Pay Period	
09/17/2010	From 09/17/2010 To 09/17/2010	
Union	SAGF	
TV-GENERAL	EXTRA	

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD	Descr	Amount	YTD
REG	17.3750	8.0	139.00	FED	12.31	522.16			
				FICA-SSA	8.62	548.42			
				FICA-MED	2.02	128.26			
				VPDI CA	1.53	97.30			
				RES ST CA	3.81	260.20			
<b>Total Hrs/Gross</b> 8.0 139.00				<b>Total</b> 28.29 1,556.34			<b>Total</b> 0.00 0.00		
<b>Total Net</b> 110.71				<b>Comments:</b> HOW I MET YOUR MOTHER					
<b>Subject FIT</b> 139.00									
<b>YTD Payments</b> 8,845.46									
<b>YTD Subj FIT</b> 8,845.46									

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In Cooperation with & Payable if Desired at  
 BANK OF AMERICA, N.A. 81187385

64-1278/611

HOW I MET YOUR MOTHER

CHECK NO	CHECK DATE	EMPLOYEE NO	CHECK CODE
81187385	09/20/2010	-C7qacPP60	-sQNdY!2VL

BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

PAY EXACTLY ONE HUNDRED TEN DOLLARS AND 71 CENTS

PAY EXACTLY \*\*\*\*\*110.71

Void after 180 days

PAY TO THE ORDER OF THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Matthew L. Seldin*  
 President  
 CFO



EPSC CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.  
**Unemployment Data:**  
Employer: EPSC CENTRAL CASTING, LLC  
Wage Request: 2835 N NAOMI ST BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81427598  
Check Date 10/19/2010  
Invoice No ECA 34209651  
EP Reference 00053352/M20350

Tax Name THYME LEWIS  
Tax-ID \*\*\*\*-\*\*-0516

	State	Federal
Marital Status	S	S
Dependents	02	02
Additional W/H		

Prod Comp: OPEN 4 BUSINESS PRODUCTIONS,

Resident State	Work State
CA	CA

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

Tax Days	Work Days
1	1

Vacation	Holiday
None	None

Last Date Worked	Pay Period
10/14/2010	From 10/14/2010 To 10/14/2010

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Union:  
AFCP  
GENERAL EXTRA

Earnings			Statutory Deductions			Voluntary Deductions			
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED	16.58	595.53			
MILEWH			17.70	FICA-SSA	10.37	638.72			
PROPS			5.50	FICA-MED	2.43	149.38			
				RES ST CA	6.02	284.66			
				VPDI CA	1.84	113.32			
<b>Total Hrs/Gross</b>		8.0	167.20	<b>Total</b>	37.24	1,781.61	<b>Total</b>	0.00	0.00
<b>Total Net</b>			129.96	<b>Comments: LOVE BITES</b>					
<b>Subject FIT</b>			167.20						
<b>YTD Payments</b>			10,301.95						
<b>YTD Subj FIT</b>			10,301.95						

U.S. PATENT 5,628,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



EPSC CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81427598

LOVE BITES			
Check No	Check Date	Employee No	Check Code
81427598	10/19/2010	-C7qacPP60	05tBfe!-du

64-1278/611  
BANK OF AMERICA  
CENTURY CITY  
1049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Twenty Nine Dollars AND 96 Cents

Pay Exactly  
\*\*\*\*\*129.96  
Void after 180 days

Pay To The Order Of THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark L. Helt*  
President  
*Richard [Signature]*  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



EPSP CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CENCAST, LLC  
Wage Request: 2835 N NAOMI ST BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81366829  
Check Date 10/12/2010  
Invoice No BCA 04202929  
EP Reference 00C30730/MY3742

Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: CBS PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H	Exempt	Exempt

Resident State	Work State
CA	CA

Tax Days	Work Days
1	1

Vacation	Holiday
None	None

Last Date Worked	Pay Period
10/06/2010	From 10/06/2010 To 10/06/2010

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Union: SAGT  
TV-GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	17.3750	8.0	139.00	FED		555.79			
O.T.	28.6862	2.9	83.19	FICA-SSA	14.65	616.36			
SMOKE			14.00	FICA-MED	3.43	144.15			
				RES ST CA		270.21			
				VPDI CA	2.59	109.35			
<b>Total Hrs/Gross</b>		10.9	236.19	<b>Total</b>	20.67	1,695.86	<b>Total</b>	0.00	0.00
<b>Total Net</b>			215.52	Comments: CSI MIAMI					
<b>Subject FIT</b>			236.19						
<b>YTD Payments</b>			9,941.25						
<b>YTD Subj FIT</b>			9,941.25						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A. 81366829



EPSP CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

CSI MIAMI			
Check No	Check Date	Employee No	Check Code
81366829	10/12/2010	-C7qacPP60	02H35Q!0Q2

64-1278/611  
BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly Two Hundred Fifteen Dollars AND 52 Cents

Pay Exactly  
\*\*\*\*\*215.52  
Void after 180 days

Pay To The Order Of: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Helms*  
President  
*Richard [Signature]*  
CFO

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⑈ 8 1 3 6 6 8 2 9 ⑈ ⑆ 0 6 1 1 1 2 7 8 8 ⑆ 3 2 9 9 1 1 4 2 2 5 ⑈





EPSP CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: EPSP CENCAST, LLC  
Wage Request: 2835 N NAOMI ST BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81353641  
Check Date 10/11/2010  
Invoice No ECA 04203581  
EP Reference 09CS0362/MY1364

Name THYME LEWIS Tax-ID \*\*\*-\*\*-0516

Prod Comp: IT'S A LAUGH PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

	State	Federal
Marital Status	S	S
Dependents	02	02
Additional W/H		

Resident State CA	Work State CA
----------------------	------------------

Tax Days 1	Work Days 1
---------------	----------------

Vacation None	Holiday None
------------------	-----------------

Last Date Worked 10/07/2010	Pay Period From 10/07/2010 To 10/07/2010
--------------------------------	--

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Union:  
AFTV  
GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	14.0000	8.0	112.00	FED	8.26	555.79			
				FICA-SSA	5.94	601.71			
				FICA-MED	1.62	140.72			
				RBS ST CA	2.04	270.21			
				VPDI CA	1.24	106.76			
<b>Total Hrs/Gross</b>			8.0	<b>Total</b>	20.10	1,675.19	<b>Total</b>	0.00	0.00
<b>Total Net</b>			91.90	<b>Comments:</b> GOOD LUCK CHARLIE					
<b>Subject FIT</b>			112.00						
<b>YTD Payments</b>			9,705.06						
<b>YTD Subj FIT</b>			9,705.06						

U.S. PATENT 5,823,578

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND

In cooperation with a Payable if Desired at  
BANK OF AMERICA, N.A.

81353641



EPSP CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

GOOD LUCK CHARLIE			
Check No	Check Date	Employee No	Check Code
81353641	10/11/2010	-C7qacPP60	01m4ell+Cr

64-1276/611

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly Ninety One Dollars AND 90 Cents

Pay Exactly

\*\*\*\*\*91.90

Void after 180 days

Pay To The Order Of THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Helms*  
President  
*Richard Laughlin*  
CFO

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⑈81353641⑈ ⑆061112788⑆ 3299114225⑈



EPSC CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CRNCAST, LLC  
Wage Request: 2835 N NAOMI ST BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81410835  
Check Date 10/15/2010  
Invoice No ECA 04206672  
EP Reference 00053375/MY739E

Tax Name THYME LEWIS Tax-ID \*\*\*-\*\*-0516

Prod Comp: KING STREET PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Marital Status	S	Federal	S
Dependents	02	Federal	02
Additional W/H			
Resident State	CA	Work State	CA
Tax Days	1	Work Days	1
Vacation	None	Holiday	None
Last Date Worked	10/13/2010	Pay Period	From 10/13/2010 To 10/13/2010
Union:	AFTR GENERAL EXTRA		

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED	23.16	578.95			
O.T.	27.0000	1.5	40.50	FICA-SSA	11.99	628.35			
WRDALW			9.00	FICA-MED	2.80	146.95			
				RES ST CA	8.43	278.64			
				VPDI CA	2.13	111.48			
<b>Total Hrs/Gross</b>		9.5	193.50	<b>Total</b>	48.51	1,744.37	<b>Total</b>	0.00	0.00
<b>Total Net</b>			144.99	<b>Comments:</b> RETIRED AT 35					
<b>Subject FIT</b>			193.50						
<b>YTD Payments</b>			10,134.75						
<b>YTD Subj FIT</b>			10,134.75						

U.S. PATENT 5,823,576

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



EPSC CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81410835

RETIRED AT 35			
Check No	Check Date	Employee No	Check Code
81410835	10/15/2010	-C7qacPP60	031Buz!4ao

64-1278/611

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Forty Four Dollars AND 99 Cents

Pay Exactly

\*\*\*\*\*144.99

Void after 180 days

Pay To The Order Of THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Selt*  
Richard Laughon  
President  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



EPSC CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: CBS PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GBE CENCAST, LLC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 252-4009-0

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

81366829  
Check Date 10/12/2010  
Invoice No RCA 04202929  
RF Reference 00030730/MX3742

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H	Exempt	Exempt
Resident State	CA	Work State CA
Tax Days	1	Work Days 1
Vacation	None	Holiday None
Last Date Worked	10/06/2010	Pay Period From 10/06/2010 To 10/06/2010
Union:	SACT TV-GENERAL EXTRA	

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	17.3750	8.0	139.00	FED		555.79			
O.T.	28.6862	2.9	83.19	FICA-SSA	14.65	616.36			
SMOKE			14.00	FICA-MED	3.43	144.15			
				RES ST CA		270.21			
				VPDI CA	2.59	109.35			
<b>Total Hrs/Gross</b>		10.9	236.19	<b>Total</b>	20.67	1,695.86	<b>Total</b>	0.00	0.00
<b>Total Net</b>			215.52	<b>Comments:</b> CSI MIAMI					
<b>Subject FIT</b>			236.19						
<b>YTD Payments</b>			9,941.25						
<b>YTD Subj FIT</b>			9,941.25						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



EPSC CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81366829

CSI MIAMI			
Check No	Check Date	Employee No	Check Code
81366829	10/12/2010	-C7qacPP60	02H35Q10Q2

64-1276/611

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly Two Hundred Fifteen Dollars AND 52 Cents

Pay Exactly

\*\*\*\*\*215.52

Void after 180 days

Pay To The Order Of: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Holt*  
President  
*Richard [Signature]*  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



BPSG CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: IT'S A LAUGH PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
Address: MARINA DEL REY, CA 90292

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CENCAST, LLC  
Wags Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81353641  
Check Date 10/11/2010  
Invoice No ECA 04200581  
EP Reference 00050362/MY1364

	State	Federal
Marital Status	S	S
Dependents	02	02
Additional W/H		
Resident State	CA	Work State CA
Tax Days	1	Work Days 1
Vacation	None	Holiday None
Last Date Worked	10/07/2010	Pay Period From 10/07/2010 To 10/07/2010
Union: AFTV		GENERAL EXTRA

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	14.0000	8.0	112.00	FED	8.26	555.79			
				FICA-SSA	6.94	601.71			
				FICA-MED	1.62	140.72			
				RBS ST CA	2.04	270.21			
				VEDI CA	1.24	106.76			
<b>Total Hrs/Gross</b>	B.C		112.00	<b>Total</b>	20.10	1,675.19	<b>Total</b>	0.00	0.00
<b>Total Net</b>			91.90	Comments: GOOD LUCK CHARLIE					
<b>Subject FIT</b>			112.00						
<b>YTD Payments</b>			9,705.06						
<b>YTD Subj FIT</b>			9,705.06						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



BPSG CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81353641

GOOD LUCK CHARLIE			
Check No	Check Date	Employee No	Check Code
81353641	10/11/2010	-C7qacPP60	01m4ell+Cr

64-1278/611  
BANK OF AMERICA  
CENTURY CITY  
2949 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly Ninety One Dollars AND 90 Cents

Pay Exactly

\*\*\*\*\*91.90

Void after 180 days

Pay To The Order Of THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Matthew R. Seltzer*  
President  
*Richard Hughes*  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.  
**Unemployment Data:**  
 Employer: GEP CBNCST, LLC  
 Wage Request: 2835 N NAOMI ST BUREBANK, CA 91504  
 Telephone No: (818) 955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4G09-0

81492174  
 Check Date 10/26/2010  
 Invoice No ECA 04214855  
 EP Reference 00053375/M25755

EPSC CENTRAL CASTING  
 2835 N. NAOMI ST., BUREBANK, CA 91504

Tax Name Tax-ID  
 THYME LEWIS \*\*\*-\*\*-0516

Prod Comp: KING STREET PRODUCTIONS

Mailing Address: THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H Exempt	Exempt	Exempt

Resident State CA	Work State CA
----------------------	------------------

Tax Days 1	Work Days 1
---------------	----------------

Vacation None	Holiday None
------------------	-----------------

Last Date Worked 10/19/2010	Pay Period From 10/19/2010 To 10/19/2010
--------------------------------	--

W-2 or 1099 15 CATAMARAN ST #3  
 Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

Union:  
 AFTR  
 GENERAL EXTRA

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED		595.53			
WRDALW			15.25	FICA-SSA	9.88	679.77			
				FICA-MED	2.31	158.98			
				RES ST CA		284.66			
				VPDI CA	1.75	120.60			
<b>Total Hrs/Gross</b>			8.0	<b>Total</b>		13.94	<b>Total</b>		0.00
<b>Total Net</b>			145.31			1,839.54	<b>Total</b>		0.00
<b>Subject FIT</b>			159.25	<b>Comments:</b> RETIRED AT 35					
<b>YTD Payments</b>			10,964.00						
<b>YTD Subj FIT</b>			10,964.00						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND.

Entertainment Partners an employee owned company  
 In cooperation with & Payable If Desired at  
 BANK OF AMERICA, N.A.  
 81492174

EPSC CENTRAL CASTING  
 2835 N. NAOMI ST  
 BUREBANK, CA 91504

RETIRED AT 35			
Check No	Check Date	Employee No	Check Code
81492174	10/26/2010	-C7qacPP60	09UaxM15+W

64-1278/611  
 BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

Pay Exactly One Hundred Forty Five Dollars AND 31 Cents

Pay Exactly  
 \*\*\*\*\*145.31

Pay To The Order Of THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Michael Douglas*  
 President  
 CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK.



EP&G CENTRAL CASTING  
2835 N. NAOMI ST., BUREBANK, CA 91504

Tax Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: KING STREET PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address: 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: GEP CENCAST, LLC  
Wage Request: 2835 N NAOMI ST BUREBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St. Unemployment No: 292-4009-0

Check Date: 10/26/2010  
Invoice No: ECA 04214854  
EP Reference: 00053375/M25730

81492152

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H Exempt	Exempt	Exempt

Resident State	Work State
CA	CA

Tax Days	Work Days
1	1

Vacation	Holiday
None	None

Last Date Worked	Pay Period
10/20/2010	From 10/20/2010 To 10/20/2010

Union: AFTR  
GENERAL EXTRA

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED		595.53			
O.T.	27.0000	3.4	91.80	FICA-SSA	16.03	669.39			
WRDALW			15.25	FICA-MED	3.75	156.67			
MEAL P			7.50	RES ST CA		284.66			
				VPDI CA	2.84	118.85			
<b>Total Hrs/Gross</b>		11.4	258.55	<b>Total</b>	22.62	1,825.60	<b>Total</b>	0.00	0.00
<b>Total Net</b>			235.93	<b>Comments: RETIRED AT 35</b>					
<b>Subject FIT</b>			258.55						
<b>YTD Payments</b>			10,804.75						
<b>YTD subj FIT</b>			10,804.75						

U.S. PATENT 5,323,576

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



EP&G CENTRAL CASTING  
2835 N. NAOMI ST  
BUREBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81492152

RETIRED AT 35

64-1278/611

Check No	Check Date	Employee No	Check Code
81492152	10/26/2010	-C7qacPP60	09Uaw1!5+W

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly Two Hundred Thirty Five Dollars AND 93 Cents

Pay Exactly

\*\*\*\*\*235.93

Void after 180 days

Pay To The Order OF: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark L. Hellett*  
Richard Laughlin  
President  
CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK

⑈ 81492152 ⑈ ⑆ 061112788⑆ 3299114225 ⑈



**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.  
**Unemployment Data:**  
 Employer: GEP CENTCAST, LLC  
 Wage Request: 2835 N NAOMI ST BUREBANK, CA 91504  
 Telephone No: (818) 955-6000  
 Unemployment State: CA  
 St Unemployment No: 292-4009-0

EPSSG CENTRAL CASTING  
 2835 N. NAOMI ST., BUREBANK, CA 91504

Tax Name: THYME LEWIS  
 Tax-ID: \*\*\*-\*\*-0516

Prod Comp: TCFTV

Mailing Address: THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

W-2 or 1099 15 CATAMARAN ST #3  
 Address: MARINA DEL REY, CA 90292

\* Please Verify Address \*  
 \* mail or fax corrections \*  
 fax no: (818) 848-0254

81491715  
 Check Date: 10/26/2010  
 Invoice No: BCA 04216377  
 EP Reference: 00053306/M28027

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/E	Exempt	Exempt
Resident State CA	Work State CA	
Tax Days 1	Work Days 1	
Vacation None	Holiday None	
Last Date Worked 10/21/2010	Pay Period From 10/21/2010 To 10/21/2010	
Union: AFTR GENERAL EXTRA		

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	18.0000	8.0	144.00	FED		595.53			
O.T.	27.0000	2.5	67.50	FICA-SSA	15.14	653.86			
WRDALW			15.25	FICA-MED	3.54	152.92			
MEAL P			17.50	RES ST CA		284.66			
				VPDI CA	2.69	116.01			
<b>Total Hrs/Gross</b>		10.5	244.25	<b>Total</b>	21.37	1,802.98	<b>Total</b>	0.00	0.00
<b>Total Net</b>			222.88	<b>Comments: FRIENDS WITH BENEFITS</b>					
<b>Subject FIT</b>			244.25						
<b>YTD Payments</b>			10,546.20						
<b>YTD Subj FIT</b>			10,546.20						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BAND AT THE TOP - NOT A WHITE BACKGROUND



EPSSG CENTRAL CASTING  
 2835 N. NAOMI ST  
 BUREBANK, CA 91504

In cooperation with & Payable if Desired at  
 BANK OF AMERICA, N.A.

81491715

FRIENDS WITH BENEFITS (TV SHOW)			
Check No	Check Date	Employee No	Check Code
81491715	10/26/2010	-C7qacPP60	09UaV8!5+W

64-1278/611  
 BANK OF AMERICA  
 CENTURY CITY  
 2049 CENTURY PARK EAST  
 LOS ANGELES, CA 90067

Pay Exactly Two Hundred Twenty Two Dollars AND 88 Cents

Pay Exactly  
 \*\*\*\*\*222.88

Void after 180 days

Pay To The Order Of: THYME LEWIS  
 15 CATAMARAN ST #3  
 MARINA DEL REY, CA 90292

*Matthew R. Selt*  
 President  
*Richard Hughes*  
 CFO

THE BACK OF THIS DOCUMENT HAS AN ARTIFICIAL WATERMARK



EPSC CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

**Claim Filing Instr:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.  
**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.  
**Unemployment Data:**  
Employer: GBE CENCAST, LLC  
Wage Request: 2835 N NAOMI ST BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81513883  
Check Date 10/27/2010  
Invoice No ECA 24216389  
EP Reference 00C52878/M27231

Tax Name THYME LEWIS Tax-ID \*\*\*-\*\*-0516

Prod Comp: IT'S A LAUGH PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address: 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

State	Federal
Marital Status S	S
Dependents 00	00
Additional W/H Exempt	Exempt
Resident State CA	Work State CA
Tax Days 1	Work Days 1
Vacation None	Holiday None
Last Date Worked 10/25/2010	Pay Period From 10/25/2010 To 10/25/2010
Union: AFTV GENERAL EXTRA	

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	14.0000	8.0	112.00	FED		595.53			
AFWARD			10.00	FICA-SSA	7.56	687.33			
				FICA-MED	1.77	160.75			
				RES ST CA		284.66			
				VPDI CA	1.35	121.95			
<b>Total Hrs/Gross 8.0 122.00</b>				<b>Total 10.68 1,850.22</b>			<b>Total 0.00 0.00</b>		
<b>Total Net 111.32</b>				<b>Comments: SHAKE IT UP</b>					
<b>Subject FIT 122.00</b>									
<b>YTD Payments 11,086.00</b>									
<b>YTD Subj FIT 11,086.00</b>									

U.S. PATENT 5,823,576

THIS CHECK HAS A MULTICOLORED BAND AT THE TOP, NOT A WHITE BACKGROUND.



EPSC CENTRAL CASTING  
2835 N. NAOMI ST  
BURBANK, CA 91504

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81513883

SHAKE IT UP			
Check No	Check Date	Employee No	Check Code
81513883	10/27/2010	-C7qacPP60	0A-a0i1403

64-1278/611

BANK OF AMERICA  
CENTURY CITY  
2649 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Eleven Dollars AND 32 Cents

Pay Exactly

\*\*\*\*\*111.32

Void after 180 days

Pay To The Order Of THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Helit*  
President  
*Richard Hughes*  
CFO





EPSP CENTRAL CASTING  
2835 N. NAOMI ST., BURBANK, CA 91504

Tax Name: THYME LEWIS  
Tax-ID: \*\*\*-\*\*-0516

Prod Comp: CBS PRODUCTIONS

Mailing Address: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

W-2 or 1099 Address: 15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

**Claim Filing Instructions:** If you become unemployed you may be eligible for benefits. You should go to the nearest Unemployment or Dept. of Labor office.

**Documents Needed:** This check stub, record of prior claim, employment location, social security card and ID.

**Unemployment Data:**  
Employer: EPSP CENTRAL CASTING, LLC  
Wage Request: 2835 N NAOMI ST  
BURBANK, CA 91504  
Telephone No: (818) 955-6000  
Unemployment State: CA  
St Unemployment No: 292-4009-0

81312776  
Check Date: 10/05/2010  
Invoice No: BCA 04197620  
EP Reference: C0052879/MX7803

	State	Federal
Marital Status	S	S
Dependents	00	00
Additional W/H	Exempt	Exempt

Resident State	Work State
CA	CA

Tax Days	Work Days
1	1

Vacation	Holiday
None	None

Last Date Worked	Pay Period
10/01/2010	From 10/01/2010 To 10/01/2010

Union: AFTR GENERAL EXTRA

\* Please Verify Address \*  
\* mail or fax corrections \*  
fax no: (818) 848-0254

Earnings				Statutory Deductions			Voluntary Deductions		
Descr	Rate	Hours	Amount	Descr	Amount	YTD Amount	Descr	Amount	YTD Amount
REG	14.0000	8.0	112.00	FED		547.53			
O.T.	21.0000	2.6	54.60	FICA-SSA	10.95	576.91			
AFWARD			10.00	FICA-MED	2.56	134.92			
				RES ST CA		268.17			
				VPD CA	1.95	102.36			
<b>Total Hrs/Gross</b>		10.6	176.60	<b>Total</b>	15.46	1,629.89	<b>Total</b>	0.00	0.00
<b>Total Net</b>			161.14	<b>Comments:</b> 90210					
<b>Subject FIT</b>			176.60						
<b>YTD Payments</b>			9,305.06						
<b>YTD Subj FIT</b>			9,305.06						

U.S. PATENT 5,823,576 THIS CHECK HAS A MULTICOLORED BARR AT THE TOP OF THE FRONT AND A WHITE BACKGROUND

In cooperation with & Payable if Desired at  
BANK OF AMERICA, N.A.

81312776

64-1278/611

90210

Check No	Check Date	Employee No	Check Code
81312776	10/05/2010	-C7qacPP60	0+fuqj!+SG

BANK OF AMERICA  
CENTURY CITY  
2049 CENTURY PARK EAST  
LOS ANGELES, CA 90067

Pay Exactly One Hundred Sixty One Dollars AND 14 Cents

Pay Exactly \*\*\*\*\*161.14

Void after 180 days

Pay To The Order Of: THYME LEWIS  
15 CATAMARAN ST #3  
MARINA DEL REY, CA 90292

*Mark R. Hill*  
President  
*Richard Douglas*  
CFO

B22B (Official Form 22B) (Chapter 11) (01/08)

In re Thyme Lewis

Debtor(s)

Case Number: \_\_\_\_\_

(If known)

### CHAPTER 11 STATEMENT OF CURRENT MONTHLY INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. CALCULATION OF CURRENT MONTHLY INCOME																							
1	<p><b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input checked="" type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 2-10.</b></p> <p>b. <input type="checkbox"/> Married, not filing jointly. <b>Complete only column A ("Debtor's Income") for Lines 2-10.</b></p> <p>c. <input type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.</b></p> <p>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.</p>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;"><b>Column A</b></td> <td style="text-align: center;"><b>Column B</b></td> </tr> <tr> <td></td> <td style="text-align: center;"><b>Debtor's Income</b></td> <td style="text-align: center;"><b>Spouse's Income</b></td> </tr> </table>		<b>Column A</b>	<b>Column B</b>		<b>Debtor's Income</b>	<b>Spouse's Income</b>													
	<b>Column A</b>	<b>Column B</b>																					
	<b>Debtor's Income</b>	<b>Spouse's Income</b>																					
2	<p><b>Gross wages, salary, tips, bonuses, overtime, commissions.</b></p>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>1,289.14</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>1,289.14</b>	\$																
	\$ <b>1,289.14</b>	\$																					
3	<p><b>Net income from the operation of a business, profession, or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If more than one business profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td>Gross receipts</td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Business income</td> <td colspan="2" style="text-align: center;">Subtract Line b from Line a</td> </tr> </tbody> </table>					Debtor	Spouse	a.	Gross receipts	\$ <b>0.00</b>	\$	b.	Ordinary and necessary business expenses	\$ <b>0.00</b>	\$	c.	Business income	Subtract Line b from Line a		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$
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4	<p><b>Net Rental and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td>Gross receipts</td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary operating expenses</td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Rent and other real property income</td> <td colspan="2" style="text-align: center;">Subtract Line b from Line a</td> </tr> </tbody> </table>					Debtor	Spouse	a.	Gross receipts	\$ <b>0.00</b>	\$	b.	Ordinary and necessary operating expenses	\$ <b>0.00</b>	\$	c.	Rent and other real property income	Subtract Line b from Line a		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$
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5	<p><b>Interest, dividends, and royalties.</b></p>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$																
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7	<p><b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse if Column B is completed.</p>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$																
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8	<p><b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 35%; text-align: center;">Debtor \$ <b>0.00</b></td> <td style="width: 35%; text-align: center;">Spouse \$</td> </tr> </table>			Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ <b>0.00</b>	Spouse \$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$													
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9	<p><b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. <b>Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include</b> any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th style="text-align: center;">Debtor</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table>					Debtor	Spouse	a.		\$	\$	b.		\$	\$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>0.00</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>0.00</b>	\$				
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10	<p><b>Subtotal of current monthly income.</b> Add lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 thru 9 in Column B. Enter the total(s).</p>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="text-align: center;">\$ <b>1,289.14</b></td> <td style="text-align: center;">\$</td> </tr> </table>		\$ <b>1,289.14</b>	\$																
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11	<b>Total current monthly income.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$ <b>1,289.14</b>
<b>Part II. VERIFICATION</b>		
12	I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this is a joint case, both debtors must sign.)</i> Date: <u>November 2, 2010</u> Signature: <u>/s/ Thyme Lewis</u> <b>Thyme Lewis</b> (Debtor)	

### Current Monthly Income Details for the Debtor

**Debtor Income Details:**

Income for the Period **05/01/2010** to **10/31/2010**.

**Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions**

Source of Income: **Wages**

Income by Month:

6 Months Ago:	<u>05/2010</u>	<u>\$2,909.55</u>
5 Months Ago:	<u>06/2010</u>	<u>\$0.00</u>
4 Months Ago:	<u>07/2010</u>	<u>\$257.95</u>
3 Months Ago:	<u>08/2010</u>	<u>\$961.79</u>
2 Months Ago:	<u>09/2010</u>	<u>\$1,587.84</u>
Last Month:	<u>10/2010</u>	<u>\$2,017.73</u>
Average per month:		<u>\$1,289.14</u>

**MASTER MAILING LIST**  
**Verification Pursuant to Local Bankruptcy Rule 1007-2(d)**

Name Giovanni Orantes 190060  
Address 3435 Wilshire Blvd., Suite 1980 Los Angeles, CA 90010  
Telephone (213) 389-4362 Fax: (877) 789-5776

- Attorney for Debtor(s)  
 Debtor in Pro Per

<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
List all names including trade names used by Debtor(s) within last 8 years: <b>Thyme Lewis</b>	Case No.:
	Chapter: <b>11</b>

**VERIFICATION OF CREDITOR MAILING LIST**

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 3 sheet(s) is complete, correct, and consistent with the debtor's schedules pursuant to Local Rule 1007-2(d) and I/we assume all responsibility for errors and omissions.

Date: November 2, 2010

/s/ Thyme Lewis  
**Thyme Lewis**  
Signature of Debtor

Date: November 2, 2010

/s/ Giovanni Orantes  
Signature of Attorney  
**Giovanni Orantes 190060**  
**Orantes Law Firm, P.C**  
**3435 Wilshire Blvd., Suite 1980**  
**Los Angeles, CA 90010**  
**(213) 389-4362 Fax: (877) 789-5776**

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Marina Del Rey, CA 90292-5778

Giovanni Orantes  
Orantes Law Firm, P.C  
3435 Wilshire Blvd., Suite 1980  
Los Angeles, CA 90010

Bac Home Loans Servicing  
450 American St  
Simi Valley, CA 93065

Bank Of America  
Attn: Bankruptcy NC4-105-02-99  
Po Box 26012  
Greensboro, NC 27410

Bank Of America  
P.O. Box 15311  
Wilmington, DE 19884

California Service Bureau  
9 Commercial # 201  
Novato, CA 94949

California Service Bureau  
Dept. 754  
P.O. Box 4115  
Concord, CA 94524

Citi  
Po Box 6241  
Sioux Falls, SD 57117

Citibank Sd, Na  
Attn: Centralized Bankruptcy  
Po Box 20507  
Kansas City, MO 64195

Citibank Usa  
Attn.: Centralized Bankruptcy  
Po Box 20363  
Kansas City, MO 64195

Client Services, Inc.  
3451 Harry Truman Blvd.  
Saint Charles, MO 63301

Franchise Tax Board  
Bankruptcy Unit  
PO Box 2952  
Sacramento, CA 95812

Internal Revenue Service  
P.O. Box 21126  
Philadelphia, PA 19114

Kathleen E. Kalbfleisch  
PO BOX 1083  
Sausalito, CA 94966

Marin Water Municipal District  
220 Nellen Avenue  
Corte Madera, CA 94925

Monterey County Tax Collector  
Post Office Box 891  
Salinas, CA 93902

Richard Allan Burger  
17 Keller St  
Petaluma, CA 94952

Santa Monica Enterprises, Inc.  
501 SANTA MONICA BLVD STE 506  
Santa Monica, CA 90401

Thd/cbsd  
P.O. Box 6497  
Sioux Falls, SD 57117

Tom McComas  
649 Santa Clara Ave  
Venice, CA 90291

United States Trustee (LA)  
725 S. Figueroa St.  
Suite 2600  
Los Angeles, CA 90017

Wachovia  
4101 Wiseman Blvd  
San Antonio, TX 78251