(Official Form 1) (10/06)

United States Bankruptcy Court District of Colorado				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): William L. Saber, M.D., P.C.		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): fka Alpine Plastic Surgery, P.C.		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. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 84-0989794		Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):			
Street Address of Debtor (No. & Street, City, State & Zip Code): 3455 Lutheran Parkway Suite 220		Street Address of Joint Debtor (No. & Street, City, State & Zip Code):			
Wheat Ridge, CO	ZIPCODE 80033			ZIPCODE	
County of Residence or of the Principal Place of Business: Jefferson		County of Residen	County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address)		Mailing Address of Joint Debtor (if different from street address):			
	ZIPCODE			ZIPCODE	
Location of Principal Assets of Business Debtor (if	different from street address a	bove):			
				ZIPCODE	
Type of Debtor (Form of Organization)	Nature of I (Check or			nkruptcy Code Under Which n is Filed (Check one box.)	
(Check one box.) ☐ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other			☐ Chapter 15 Petition for Recognition of a Foreign Main Proceeding ☐ Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box)	
	(Check box, if ☐ Debtor is a tax-exemp Title 26 of the United	Tax-Exempt Entity (Check box, if applicable.) ☐ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		y consumer 1 U.S.C. red by an ly for a r house-	
Filing Fee (Check one b	pox)	C	Chapter 11 I	Debtors:	
 ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable attach signed application for the court's consider is unable to pay fee except in installments. Rule 3A. ☐ Filing Fee waiver requested (Applicable to chapt 	Check one box: ✓ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: ☐ Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million. Check all applicable boxes:				
attach signed application for the court's consider	A plan is being filed with this petition Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).				
Statistical/Administrative Information ✓ Debtor estimates that funds will be available for □ Debtor estimates that, after any exempt property no funds available for distribution to unsecured	is excluded and administrative			ACE IS FOR COURT USE ONLY	
Estimated Number of Creditors			_		
1- 50- 100- 200- 1,000- 49 99 199 999 5,000	5,001- 10,001- 25,0 10,000 25,000 50,0		Over 00,000		
Estimated Assets					
\$0 to \$10,000 to \$10,000	\$100,000 to \$1 million \$100 r		than million		
Estimated Liabilities	,		than million		

(Official Form 1) (10/06)		FORM B1, Page			
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): William L. Saber, M.D., P.C.				
Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)					
Location Where Filed: None	Case Number:	Date Filed:			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	re than one, attach additional sheet)			
Name of Debtor: None	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition.	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.				
	Signature of Attorney for Debtor(s)	Date			
Does the debtor own or have possession of any property that poses or is a or safety? Yes, and Exhibit C is attached and made a part of this petition. No	abit D ach spouse must complete and attande a part of this petition.				
	O days than in any other District. partner, or partnership pending in lace of business or principal assets but is a defendant in an action or pr	this District. in the United States in this District, occeding [in a federal or state court]			
Statement by a Debtor Who Resides (Check all app Landlord has a judgment against the debtor for possession of deb	plicable boxes.)	-			
(Name of landlord or less	or that obtained judgment)				
(Address of lar	ndlord or lessor)				
Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possess	e circumstances under which the de				
Debtor has included in this petition the deposit with the court of an of the petition.					

Voluntary Petition

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

Name of Debtor(s):

William L. Saber, M.D., P.C.

Signatures

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

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

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

Signature of Debtor

Х

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.



Signature of Foreign Representative



Printed Name of Foreign Representative

Date

Signature of Attorney

X /s/ Jeffrey A. Weinman

Signature of Attorney for Debtor(s)

Jeffrey A. Weinman 7605

Printed Name of Attorney for Debtor(s)

Weinman & Associates, P.C.

730 17th Street, Suite 240

Denver, CO 80202

(303) 572-1010

Telephone Number

March 2, 2007

Date

Signature of Non-Attorney Petition Preparer

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

Χ

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

Date

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

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

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

Signature of Debtor (Corporation/Partnership)

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

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

X /s/ William L. Saber

Signature of Authorized Individual

William L. Saber

Printed Name of Authorized Individual

President

Title of Authorized Individual

March 2, 2007

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United States Bankruptcy Court District of Colorado

IN RE:		Case No.
William L. Saber, M.D., P.C.		Chapter 11
	Debtor(s)	
	VERIFICATION OF CREDITOR MA	TRIX
The above named debtor(s) hereby v	verify(ies) that the attached matrix listing cred	itors is true to the best of my(our) knowledge.
Date: March 2, 2007	Signature: /s/ William L. Saber	
	William L. Saber, President	Debtor
Date:	Signature:	
		Joint Debtor, if any

Allergan Sales, LLC 12975 Collections Center Drive Chicago, IL 60693-0001

DexMedia, Inc. Accounts Receivable Department PO Box 173799 Denver, CO 80217-3799

Initial Tropical Plants, Inc. PO Box 95409 Palatine, IL 60095-0409

Jefferson County Treasurer 100 Jefferson County Parkway Golden, CO 80419-0001

John Reha, Esq. Arckey & Reha, LLC 26 W Dry Creek Cir Ste 800 Littleton, CO 80120-8038

Marlena Johnson Surgical Assisting 2765 Pierce St Wheat Ridge, CO 80214-8050

Mentor Aesthetic Products PO Box 512228 Los Angeles, CA 90051-0228

Mitchell A. Fremling, M.D. 340 E 1st Ave Broomfield, CO 80020-2401

North Suburban Medical Center 9191 Grant St Denver, CO 80229-4361

Sherman & Howard, LLC 633 17th St Ste 3000 Denver, CO 80202-3622

Springer And Steinberg, P.C. Attn: Jeffery Springer, Esq. 1600 Broadway Ste 1200 Denver, CO 80202-4920