B1 (Official Form 1)(12/11)									
		s Bankı District						Volunta	ary Petition
Name of Debtor (if individual, enter Last, Fi Liberty Properties of Newburgh,		:		Name	of Joint De	ebtor (Spouse)	) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						used by the J maiden, and		in the last 8 years):	
Last four digits of Soc. Sec. or Individual-Ta (if more than one, state all) 20-4935120	kpayer I.D.	(ITIN) No./0	Complete EI	N Last for (if more	our digits o than one, state	f Soc. Sec. or	Individual-1	Taxpayer I.D. (ITI	N) No./Complete EIN
Street Address of Debtor (No. and Street, City, and State):  20 S.E. 3rd Street  Boca Raton, FL					Address of	Joint Debtor	(No. and Str	reet, City, and Stat	e): ZIP Code
		Γ:	ZIP Code 33432	$\dashv$					ZIP Code
County of Residence or of the Principal Plac Palm Beach	e of Busines			Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from	street addre	ess):		Mailir	ng Address	of Joint Debte	or (if differen	nt from street addr	ress):
		_	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Del (if different from street address above):	tor 5	688 Pros lewburgh	-						
Type of Debtor			of Business			•	•	otcy Code Under	
(Form of Organization) (Check one box)  ☐ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)  ☐ Partnership  ☐ Other (If debtor is not one of the above entitic check this box and state type of entity below.)	(Check one box)  ☐ Health Care Business  ■ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Starbhalara			defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ CI of ☐ CI	hapter 15 Petition a Foreign Main P hapter 15 Petition a Foreign Nonma	for Recognition roceeding for Recognition
Chapter 15 Debtors	Oth							e of Debts	
Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United State Code (the Internal Revenue Code)			ation ates	defined "incurr	are primarily co I in 11 U.S.C. § ed by an indivi- onal, family, or l	nsumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.	
Filing Fee (Check one	oox)		Check	one box:	1	Chap	ter 11 Debt	ors	
Full Filing Fee attached  ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must  ☐ Pebtor 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 is a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  ☐ Check if:  ☐ Debtor is not 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).  ☐ Debtor is not 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).  ☐ Debtor is not 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).  ☐ Debtor is not 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).  ☐ Debtor is not 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).  ☐ Debtor is not 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).  ☐ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51									
attach signed application for the court's conside	ration. See U	micial Form 3	L P			vere solicited pr S.C. § 1126(b).	repetition from	one or more classes	of creditors,
Statistical/Administrative Information  ☐ Debtor estimates that funds will be availa ☐ Debtor estimates that, after any exempt p there will be no funds available for distril	operty is ex	cluded and	administrati		es paid,		THIS	SPACE IS FOR CO	URT USE ONLY
Estimated Number of Creditors	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities  Stophysical Stophys	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

9/25/12 5:10PM

B1 (Official For	rm 1)(12/11)		Page 2				
Voluntar	y Petition	Name of Debtor(s): Liberty Properties of	of Newburgh I C				
(This page mu	ast be completed and filed in every case)	Liberty Freporties of Newburgin, 2.0.					
1 0	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than two	, attach additional sheet)				
Location Where Filed:	- None -	Case Number:	Date Filed:				
Location Where Filed:		Case Number:	Date Filed:				
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If	more than one, attach additional sheet)				
Name of Debt	or:	Case Number:	Date Filed:				
District:		Relationship:	Judge:				
	Exhibit A	(T) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Exhibit 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.)  □ Exhibit A is attached and made a part of this petition.  (To be completed if debtor is an individual whose debts are primarily of the petitioner named in the foregoing petition have informed the petitioner that [he or she] may proceed under 12, or 13 of title 11, United States Code, and have explained the under each such chapter. I further certify that I delivered to the required by 11 U.S.C. §342(b).  X Signature of Attorney for Debtor(s) (Date)							
	Ext	ibit C					
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and	identifiable harm to public health or safety?				
	Exi	nibit D					
-	leted by every individual debtor. If a joint petition is filed, ea	-	nd attach a separate Exhibit D.)				
	D completed and signed by the debtor is attached and made	a part of this petition.					
If this is a join Exhibit	Interpolation:  D also completed and signed by the joint debtor is attached.	and made a part of this petit	ion.				
	Information Regardin	ng the Debtor - Venue					
_	(Check any ap	-					
	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for						
	There is a bankruptcy case concerning debtor's affiliate, g	٠.	•				
	Certification by a Debtor Who Reside		al Property				
	(Check all app Landlord has a judgment against the debtor for possession		x checked, complete the following.)				
	(Name of landlord that obtained judgment)						
	(Address of landlord)						
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment						
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would b	ecome due during the 30-day period				
_	Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C.	§ 362(l)).				

B1 (Official Form 1)(12/11)

Page 3

## **Voluntary Petition**

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

#### 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

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Steven S. Newburgh

Signature of Attorney for Debtor(s)

#### Steven S. Newburgh 0348619

Printed Name of Attorney for Debtor(s)

## McLaughlin & Stern, LLP

Firm Name

CityPlace Office Tower - Suite 1530 525 Okeechobee Blvd. West Palm Beach, FL 33401

Address

Email: snewburgh@mclaughlinstern.com 561-659-4020 Fax: 561-659-4438

Telephone Number

### September 25, 2012

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 /s/ William Gates

Signature of Authorized Individual

#### William Gates

Printed Name of Authorized Individual

#### **Managing Member**

Title of Authorized Individual

**September 25, 2012** 

Date

#### Signature of a Foreign Representative

9/25/12 5:10PM

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.)

Name of Debtor(s):

- ☐ 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

Liberty Properties of Newburgh, L.C.

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 bankrutpcy 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.)

v			
		. 1	•
	٦	ĸ	

Date

Address

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.

**B4** (Official Form 4) (12/07)

## **United States Bankruptcy Court** Southern District of Florida

In re	Liberty Properties of Newburgh, L.C.		Case No.	
		Debtor(s)	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)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203	Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203	Cell Tower Manufacturing Facility Property	Contingent Unliquidated Disputed	Unknown (Unknown secured)

B4 (Official Form 4) (12/07) - Cont.							
In re	Liberty Properties of Newburgh, L.C.	Case No.					
	Debtor(s)						

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]

# DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

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

Date	September 25, 2012	Signature	/s/ William Gates
		-	William Gates
			Managing Member

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.

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

In re	Liberty Properties of Newburgh, L.C.		Case No.		
_		Debtor			

## 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.

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 "Unsecured Portion" on the Statistical 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.

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	Hu H V	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH L ZGEZH	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.  Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203		-	First Mortgage  Cell Tower Manufacturing Facility  Property	х		х		
			Value \$ Unknown				Unknown	Unknown
Account No.			Value \$ Value \$					
Account No.			Value \$					
continuation sheets attached		•	S (Total of th	ubt nis p			0.00	0.00
			(Report on Summary of Sc		ota ule		0.00	0.00

Case 12-32882-PGH Doc 1 Filed 09/25/12 Page 7 of 10

<b>United States Bankruptcy Court</b>
<b>Southern District of Florida</b>

	Southern District of Florid		
In re Liberty Properties of Newburgh, L.C.		Case No	
	Debtor	, Chapter	11
Following is the list of the Debtor's equity security		ordance with Rule 1007(a)(.	
Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
None  DECLARATION UNDER PENALTY O	OF PERJURY ON BEHAI	LF OF CORPORATI	ON OR PARTNERSHIP
I, the Managing Member of the corread the foregoing List of Equity Securit	y Holders and that it is true and	d correct to the best of m	
Date September 25, 2012	Ī	/s/ William Gates Villiam Gates //anaging Member	

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.

## **United States Bankruptcy Court** Southern District of Florida

In re _ Liberty Properties of Newburgh, L.C.	Debtor(s)	Case No. Chapter	11	
VERIFICATION OF CREDITOR MATRIX				
I, the Managing Member of the corporation named as correct to the best of my knowledge.	the debtor in this case, hereby veri	ify that the attach	ned list of creditors is true and	
Date: September 25, 2012	/s/ William Gates William Gates/Managing Memb Signer/Title	er		

Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203

## **UNITED STATES BANKRUPTCY COURT**

Southern District of Florida www.flsb.uscourts.gov

<ol> <li>Document(s) is true and correct to the best of my knowledge and belief.</li> <li>I understand that Verified Document(s) filed in electronic form shall be treated for all purposes (both civil and criminal, including penalties of perjury) in the same manner as though signed or subscribed.</li> <li>I understand that the Verified Document(s) will be filed by my attorney in electronic form in connection with the above captioned case and that I have received and reviewed copies of the Verified Document(s) I have signed.</li> </ol>	In Re: Liberty Properties of Newburgh, L.C.	Case Number Chapter 11	
FEE APPLICATIONS AND STATEMENTS FILED ELECTRONICALLY  Note: This declaration must be filed with each electronically filed initial petition or amended petition and must contain the imaged signature of the debtor. This declaration must also be filed with an initial schedule, Application to Pay Filing Fee in Installments, Application for Waiver of the Chapter 7 Filing Fee. Fes. Fes. Statement of Social Security Number, or Statement of Current Monthly Income (OBF 22) not filed with the initial petition or any amended schedules, SFA, Statement of Social Security Number, and/or Statement of Current Monthly Income (OBF 22) unless these documents contain an imaged signature of the debtor(s).  Check all documents that apply to this declaration  Application by Individual Debtor to Pay Filing Fee in Installments September 24, 2012  Application for Waiver of the Chapter 7 Filing Fee for Individuals Who Camou Pay the Filing Fee in Full or in Installments Amended voluntary petition signed by me on Schedules signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Financial Affairs signed by me on Amended Statement of Current Monthly Income (OBF 22) signed by me on Amended Statement of Current Monthly Income (OBF 22) signed by me on Amended Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Monthly Income (OBF 22) signed by me on The Statement of Current Mont	Debtor(s)	/	
signature of the debtor. This declaration must also be filed with an initial schedule, Application to Pay Filing Fee in Installments, Application for Waiver of the Chapter 7 Filing Fee, SFA, Statement of Social Security Number, and/or Statement of Current Monthly Income (OBF 22) unless these documents contain an imaged signature of the debtor(s).  Check all documents that apply to this declaration  Check all documents that apply to this declaration  Application by Individual Debtor to Pay Filing Fee in Installments  Voluntary petition signed by me on  Schedules signed by me on  Statement of Financial Affairs signed by me on  Statement of Financial Affairs signed by me on  Statement of Financial Affairs signed by me on  Statement of Current Monthly Income (OBF 22)  signed by me on  Statement of Current Monthly Income (OBF 22)  signed by me on  Statement of Current Monthly Income (OBF 22)  signed by me on  In the understigned debtor(s) hereby declare under penalty of perjury as follows:  1. I have reviewed and signed the original(s) of the document(s) identified above and the information contained in the Verified Document(s) its true and correct to the best of my knowledge and belief.  2. I understand that Verified Document(s) filed in electronic form shall be treated for all purposes (both civil and criminal, including penalties of perjury) in the same manner as though signed or subscribed.  3. I understand that the Verified Document(s) will be filed by my attorney in electronic form in connection with the above captioned case and that I have received and reviewed copies of the Verified Document(s) for five years from date of discharge, dismissal or the conclusion of any pending appeals in this case and provide these documents to the court upon request at any time.  Signature of Debtor  (If non individual, authorized corporate representative)  Print Name  561-659-4020			
Application by Individual Debtor to Pay Filing Fee in Installments    Application for Waiver of the Chapter 7 Filing Fee for Individuals Who Cannot Pay the Filing Fee in Full or in Installments   Application for Waiver of the Chapter 7 Filing Fee for Individuals Who Cannot Pay the Filing Fee in Full or in Installments   Amended Steduler Signed by me on   Amended Voluntary petition signed by me on   Amended Statement of Financial Affairs signed by me on   Amended Statement of Social Security Number(s) signed by me on   Amended Statement of Financial Affairs signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Amended Statement of Current Monthly Income (OBF 22)   Signed by me on   Statement of Current Monthly Income (OBF 22)   Signed by me on   Statement of Current Monthly Income (OBF 22)   Signed by me on   Statement of Current Monthly Income (OBF 22)   Signed by me on   Statement of Current Monthly Income (OBF 22)   Signed by me on   Statement of Current Monthly Income (	signature of the debtor. This declaration must also be filed with Application for Waiver of the Chapter 7 Filing Fee, SFA, Staten Income (OBF 22) not filed with the initial petition or any amend	an initial schedule, Application to Pay Filing Fee in Installments, nent of Social Security Number, or Statement of Current Monthly led schedules, SFA, Statement of Social Security Number, and/or	
Application by Individual Debtor to Pay Filing Fee in Installments	Check all documents that apply to this declaration		
Statement of Current Monthly Income (OBF 22)   Amended Statement of Current Monthly Income (OBF 22)   signed by me on	Voluntary petition signed by me on Schedules signed by me on Statement of Financial Affairs signed by me on Statement of Social Security Number(s) signed by	Cannot Pay the Filing Fee in Full or in Installments  Amended voluntary petition signed by me on  Amended schedules signed by me on  Amended Statement of Financial Affairs signed by me on  Amended Statement of Social Security Number(s) signed by	
1. I have reviewed and signed the original(s) of the document(s) identified above and the information contained in the Verified Document(s) is true and correct to the best of my knowledge and belief.  2. I understand that Verified Document(s) filed in electronic form shall be treated for all purposes (both civil and criminal, including penalties of perjury) in the same manner as though signed or subscribed.  3. I understand that the Verified Document(s) will be filed by my attorney in electronic form in connection with the above captioned case and that I have received and reviewed copies of the Verified Document(s) I have signed.  4. I understand that my attorney is required by the court to retain the original signed Verified Document(s) for five years from date of discharge, dismissal or the conclusion of any pending appeals in this case and provide these documents to the court upon request at any time.  Signature of Debtor (If non individual, authorized corporate representative)  Print or Type Name (and title if applicable)  Print Name  561-659-4020	Statement of Current Monthly Income (OBF 22)	Amended Statement of Current Monthly Income (OBF 22)	
1. I have reviewed and signed the original(s) of the document(s) identified above and the information contained in the Verified Document(s) is true and correct to the best of my knowledge and belief.  2. I understand that Verified Document(s) filed in electronic form shall be treated for all purposes (both civil and criminal, including penalties of perjury) in the same manner as though signed or subscribed.  3. I understand that the Verified Document(s) will be filed by my attorney in electronic form in connection with the above captioned case and that I have received and reviewed copies of the Verified Document(s) I have signed.  4. I understand that my attorney is required by the court to retain the original signed Verified Document(s) for five years from date of discharge, dismissal or the conclusion of any pending appeals in this case and provide these documents to the court upon request at any time.  Signature of Debtor (If non individual, authorized corporate representative)  Print or Type Name (and title if applicable)  Print Name  561-659-4020	I, , the undersigned debtor(s) hereby declare under pen	alty of perjury as follows:	
including penalties of perjury) in the same manner as though signed or subscribed.  3. I understand that the Verified Document(s) will be filed by my attorney in electronic form in connection with the above captioned case and that I have received and reviewed copies of the Verified Document(s) I have signed.  4. I understand that my attorney is required by the court to retain the original signed Verified Document(s) for five years from date of discharge, dismissal or the conclusion of any pending appeals in this case and provide these documents to the court upon request at any time.  Signature of Debtor (If non individual, authorized corporate representative)  Print or Type Name (and title if applicable)  Print Name  561-659-4020	Document(s) is true and correct to the best of my knowledg	ge and belief.	
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(If non individual, authorized corporate representative)  Print or Type Name (and title if applicable)  Print Name  561-659-4020	of discharge, dismissal or the conclusion of any pending ap		
Print or Type Name (and title if applicable)  Print Name  561-659-4020		Signature of Joint Debtor (if applicable)	
561-659-4020	(If non individual, authorized corporate representative)		
561-659-4020	Print or Type Name (and title if applicable)	Print Name	
<del>-</del>	1. The 1 time (and the it applicable)		
	Print or Type Name of Attorney for Debtor		