Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 1 of 35

Fill in this information to i	dentify your case:		
United States Bankruptcy C	ourt for the:		
NORTHERN DISTRICT OF	GEORGIA		
Case number (if known)		Chapter 11	
L			

Check if this an amended filing

Official Form 201 Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

Debtor's name	Family Works, Inc.	
All other names debtor used in the last 8 years		
Include any assumed names, trade names and <i>doing business as</i> names		
Debtor's federal Employer Identification Number (EIN)	33-1214226	
Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	3562 Habersham at Northlake Building J Tucker. GA 30084	
	Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
	DeKalb	Location of principal assets, if different from principal
	County	place of business
		Number, Street, City, State & ZIP Code
Debtor's website (URL)		
Type of debtor	Corporation (including Limited Liability Compan	y (LLC) and Limited Liability Partnership (LLP))
	Partnership (excluding LLP)	
	Other. Specify:	
	All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names Debtor's federal Employer Identification Number (EIN) Debtor's address Debtor's website (URL)	All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names Debtor's federal Employer Identification Number (EIN) 33-1214226 Debtor's address Principal place of business 3562 Habersham at Northlake Building J Tucker, GA 30084 Number, Street, City, State & ZIP Code DeKalb County Debtor's website (URL) Type of debtor Corporation (including Limited Liability Compar Partnership (excluding LLP)

	Case 17-5775	52-crm Doc 1	Filed 05/01/17	Entered 05/01/1	7 08:59:02 Desc Main
Debt	or Family Works, Inc.		Document P	age 2 of 35 Case number (if	known)
	Name				
7.	Describe debtor's business	A. Check one:			
		Health Care Busi	ness (as defined in 11 U.S	.C. § 101(27A))	
			Estate (as defined in 11 L		
			ed in 11 U.S.C. § 101(44)		
			efined in 11 U.S.C. § 101(
		_ ``	er (as defined in 11 U.S.C.	<i>,,</i>	
			s defined in 11 U.S.C. § 78		
		□ None of the abov		(-))	
		B. Check all that app	-		
			(as described in 26 U.S.C	c ,	
					ele (as defined in 15 U.S.C. §80a-3)
		L Investment advise	or (as defined in 15 U.S.C.	. §80b-2(a)(11))	
				on System) 4-digit code tha	
			courts.gov/four-digit-nation	nal-association-naics-codes	<u>3</u> .
		6232			
8.	Under which chapter of the	Check one:			
	Bankruptcy Code is the debtor filing?	Chapter 7			
	aciden ming.	Chapter 9			
		Chapter 11. Chec	k all that apply:		
		I			ts (excluding debts owed to insiders or affiliates)
			are less than \$2,566,0	050 (amount subject to adju	stment on 4/01/19 and every 3 years after that).
			business debtor, attac	ch the most recent balance	in 11 U.S.C. § 101(51D). If the debtor is a small sheet, statement of operations, cash-flow
		_	procedure in 11 U.S.C	C. § 1116(1)(B).	of these documents do not exist, follow the
		-	A plan is being filed w	1	
		l	Acceptances of the pl accordance with 11 U		n from one or more classes of creditors, in
		[example, 10K and 10Q) with the Securities and) of the Securities Exchange Act of 1934. File the
			attachment to Volunta	ary Petition for Non-Individu	als Filing for Bankruptcy under Chapter 11
			(Official Form 201A) v		
			The debtor is a shell of	company as defined in the S	Securities Exchange Act of 1934 Rule 12b-2.
		Chapter 12			
9.	Were prior bankruptcy cases filed by or against	No.			
	the debtor within the last 8 years?	□ Yes.			
	If more than 2 cases, attach a	-			
	separate list.	District		When	Case number
		District		When	Case number
10.	Are any bankruptcy cases	■ No			
	pending or being filed by a business partner or an	_			
	affiliate of the debtor?	☐ Yes.			
	List all cases. If more than 1,	Debtor			Relationship
	attach a separate list	District		When	Case number, if known

Debt	Case 17-57 [°] Family Works, Inc.		n Doc		d 05/0 umer	01/17 nt F	Entered 05/01/2 Page 3 of 35 Case number		02 Desc Main
	Name								
11.	Why is the case filed in	Check al	l that apply.						
	this district?	■ De	btor has ha	d its domicile			e of business, or principal a onger part of such 180 day		istrict for 180 days immediately
			•				liate, general partner, or p	-	
			Jankiupicy		ing der		nate, general partner, or p		
12.	Does the debtor own or	No							
	have possession of any real property or personal	□ Yes.	Answer be	elow for each	proper	ty that ne	eeds immediate attention.	Attach addition	al sheets if needed.
	property that needs immediate attention?		Why does	s the proper	ty need	immedi	ate attention? (Check all	that apply.)	
			□ It pose	s or is allege	d to pos	se a threa	at of imminent and identifia	able hazard to	public health or safety.
			What is	the hazard?					
			□ It need	s to be physi	cally se	cured or	protected from the weather	er.	
							ets that could quickly deter ry, produce, or securities-		value without attention (for example, or other options).
			Other						
			Where is	the property	/?				
						Numbe	er, Street, City, State & ZIF	Code	
			-	perty insure	ed?				
			□ No						
				Insurance ag					
				Contact nam	e				
				Phone					
	Statistical and admin	istrative ir	nformation						
13.	Debtor's estimation of	. C	heck one:						
	available funds		Funds wil	l be available	e for dis	tribution	to unsecured creditors.		
		С	After any	administrativ	e exper	nses are	paid, no funds will be avai	lable to unsect	ured creditors.
14.	Estimated number of creditors	1 -49					1,000-5,000		25,001-50,000
		□ 50-99 □ 100-1					5001-10,000 10,001-25,000		50,001-100,000 More than100,000
		□ 100-19 □ 200-99					10,001 20,000		
15.	Estimated Assets	□ \$0 - \$	50.000				\$1,000,001 - \$10 million		\$500,000,001 - \$1 billion
		□ \$50,00	01 - \$100,0				\$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion
			001 - \$500,				\$50,000,001 - \$100 million		\$10,000,000,001 - \$50 billion
		■ \$500,0	001 - \$1 mi	llion			\$100,000,001 - \$500 millio	on 🗋	More than \$50 billion
16.	Estimated liabilities	□ \$0 - \$	50.000				\$1,000,001 - \$10 million		\$500,000,001 - \$1 billion
)01 - \$100,0	000			\$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion
			001 - \$500,				\$50,000,001 - \$100 million		\$10,000,000,001 - \$50 billion
		\$ 500,0	001 - \$1 mi	llion			\$100,000,001 - \$500 millio	on L	More than \$50 billion

Debtor	Family Works, Inc.
	Name

		DUSU
Document	Page 4 of 35 Case number (<i>if known</i>)	

Request for Relief,	Declaration, and Signatures	
ARNING Bankruptcy fraud imprisonment fo	d is a serious crime. Making a false statement in connection w r up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3	rith a bankruptcy case can result in fines up to \$500,000 or 3571.
7. Declaration and signatur	e	
of authorized representative of debtor	The debtor requests relief in accordance with the chapter	of title 11, United States Code, specified in this petition.
	I have been authorized to file this petition on behalf of the	e debtor.
	I have examined the information in this petition and have	a reasonable belief that the information is trued and correct.
	I declare under penalty of perjury that the foregoing is tru	e and correct.
	Executed on April 30, 2017 MM / DD / YYYY	
	✗ /s/ James Abel	James Abel
	Signature of authorized representative of debtor	Printed name
	Title CEO	
9. Signature of ottornou	X /s/ Will B. Geer	Date April 30, 2017
8. Signature of attorney	Signature of attorney for debtor	
	с <i>,</i>	
	Will B. Geer Printed name	
	Law Office of Will B. Geer, LLC	
	333 Sandy Springs Circle, NE	
	Suite 225 Atlanta, GA 30328	
	Number, Street, City, State & ZIP Code	
	Contact phone 678-587-8740 Email addr	ess willgeer@willgeerlaw.com
	940493	
	Bar number and State	

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 5 of 35

Fill in this information to identify the case:	
Debtor name Family Works, Inc.	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number (if known)	Check if this is an amended filing

Official Form 202 Declaration Under Penalty of Perjury for Non-Individual Debtors 12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration

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

Executed on	April 30, 2017

X /s/ James Abel

Signature of individual signing on behalf of debtor

James Abel

Printed name

CEO

Position or relationship to debtor

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 6 of 35

NORTHERN DISTRICT OF

GEORGIA

Fill in this information to identify the case:

Debtor name Family Works, Inc. United States Bankruptcy Court for the:

Case number (if known):

Check if this is an

amended filing

Official Form 204 Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	claim is partially secure	cured, fill in only unsecur d, fill in total claim amour toff to calculate unsecure	t and deduction for
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
ADT Security Services, Inc. Corporation Trust Center 1209 Orange St. Wilmington, DE 19801						\$900.00
Georgia Department of Labor 148 Andrew Young Inter. Blvd Room 738 Atlanta, GA 30303				\$191.60	\$0.00	\$191.60
Herve Apollon 179-07 120th Avenue Jamaica, NY 11434-2717		Unsecured Loan				\$100,000.00

	Document Page / of 35		
Fill in this information to identify the c	ase:		
Debtor name Family Works, Inc.			
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA		
Case number (if known)		Check if this is an amended filing	

-	ficial Form 206Sum mmary of Assets and Liabilities for Non-Individuals		12/15
Par	t 1: Summary of Assets		
1.	Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
	1a. Real property: Copy line 88 from Schedule A/B	\$	800,000.00
	1b. Total personal property: Copy line 91A from Schedule A/B	\$	78,010.16
	1c. Total of all property: Copy line 92 from Schedule A/B	\$	878,010.16
	t 2: Summary of Liabilities Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D		478,323.10
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)		478,323.10
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	
Par 2. 3.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) 3a. Total claim amounts of priority unsecured claims:	\$ \$	478,323.10 0.00 100,900.00

	Document Page 8 of 35	
Fill in this information to identify the cas	e:	
Debtor name Family Works, Inc.		
United States Bankruptcy Court for the:	IORTHERN DISTRICT OF GEORGIA	
Case number (if known)		☐ Check if this is an amended filing

Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form. Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

□ No. Go to Part 2.

...

۱ 🔳	es Fill in the information below.			
All	cash or cash equivalents owned or controlled by th	e debtor		Current value of debtor's interest
3.	Checking, savings, money market, or financial br Name of institution (bank or brokerage firm)	okerage accounts (Identify all) Type of account	Last 4 digits of account number	
	3.1. First Citizens	Checking	1701	\$1,506.00
	3.2. Bank of America	Checking		\$100.00
4.	Other cash equivalents (Identify all)			
5.	Total of Part 1.			\$1,606.00
Part 2:	Add lines 2 through 4 (including amounts on any add Deposits and Prepayments	litional sheets). Copy the total to line	e 80.	
6. Doe s	s the debtor have any deposits or prepayments?			
	No. Go to Part 3.			
ום	es Fill in the information below.			
Part 3:				
10. Doe	es the debtor have any accounts receivable?			
	No. Go to Part 4.			
٦١	es Fill in the information below.			

Investments Part 4:

Official Form 206A/B

	Case 17-57752-crm		iled 05/01/17 Entered ocument Page 9 of 3		Desc Main
Debto			Case	e number (If known)	
	Name				
13. Doe	es the debtor own any investmen	ts?			
_	No. Go to Part 5. /es Fill in the information below.				
Part 5: 18. Doe	Inventory, excluding agricutes the debtor own any inventory (:ulture assets)?		
	No. Go to Part 6. /es Fill in the information below.				
Part 6:			than titled motor vehicles and lan		
27. Doe	es the debtor own or lease any fa	rming and fish	ng-related assets (other than title	ed motor vehicles and land))?
_	No. Go to Part 7.				
ЦY	es Fill in the information below.				
Part 7:	Office furniture, fixtures, and	nd equipment;	and collectibles		
38. Doe	es the debtor own or lease any of	fice furniture,	xtures, equipment, or collectibles	s?	
	No. Go to Part 8.				
■ Y	es Fill in the information below.				
	General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office furniture and fixtures	5	\$32,517.39	Replacement	\$32,517.39
40.	Office fixtures				
41.	Office equipment, including all communication systems equip Computers and Office Equi	ment and soft		Replacement	\$30,918.77
	Medical Equipment		\$12,968.00	Replacement	\$12,968.00
42.	Collectibles <i>Examples</i> : Antiques books, pictures, or other art objections; other collections, me	cts; china and c	ystal; stamp, coin, or baseball card		
				Γ	\$76,404.16
43.	Total of Part 7. Add lines 39 through 42. Copy th	ne total to line 8	i.		
				L	
	Add lines 39 through 42. Copy the second sec			L	
43. 44. 45.	Add lines 39 through 42. Copy the second se	ilable for any o		n the last year?	

Official Form 206A/B

Debtor	· , · · · · ·		Case	number (If known)	
	Name				
	o. Go to Part 9.				
ЦY	es Fill in the information below.				
Part 9:	Real property				
. Doe	s the debtor own or lease any real	property?			
	o. Go to Part 10.				
■ Y	es Fill in the information below.				
5.	Any building, other improved rea	al estate, or land which	h the debtor owns or in w	hich the debtor has an inter	est
	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
	55.1. 3562 Habersham at Northlake Building J Tucker, GA 30084	Fee simple	Unknown	Tax records	\$800,000.0
6.	Total of Part 9.				\$800,000.00
	Add the current value on lines 55.1 Copy the total to line 88.	through 55.6 and entrie	es from any additional shee	its.	
7.	Is a depreciation schedule availa ■ No □ Yes	ble for any of the pro	perty listed in Part 9?		
58.	■ Yes Has any of the property listed in Part 9 been appraised by a professional within the last year? No Yes				
Part 10	Intangibles and intellectual p	roperty			
). Doe	s the debtor have any interests in	intangibles or intellec	tual property?		
_	o. Go to Part 11. es Fill in the information below.				
	All other assets				
art 11					

☐ Yes Fill in the information below.

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 11 of 35

Debtor	Family Works, Inc.	Case number (If known)
	Name	

Summary Part 12:

In Pa	art 12 copy all of the totals from the earlier parts of the form			
	Type of property	Current value of personal property	Curren proper	t value of real ty
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$1,606.00		
81.	Deposits and prepayments. Copy line 9, Part 2.	\$0.00		
82.	Accounts receivable. Copy line 12, Part 3.	\$0.00		
83.	Investments. Copy line 17, Part 4.	\$0.00		
84.	Inventory. Copy line 23, Part 5.	\$0.00		
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00		
86.	Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$76,404.16		
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$0.00		
88.	Real property. Copy line 56, Part 9	>	_	\$800,000.00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00		
90.	All other assets. Copy line 78, Part 11.	+\$0.00		
91.	Total. Add lines 80 through 90 for each column	\$78,010.16	+ 91b.	\$800,000.00
92.	Total of all property on Schedule A/B. Add lines 91a+91b=92			\$878,010.16

Fill in this infor	Fill in this information to identify the case:				
Debtor name	Family Works, Inc.				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA			
Case number (if	known)		Check if this is an amended filing		
Official Forr	m 206D				

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

D No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2 1 1	st in alphabetical order all creditors wh	o have secured claims. If a creditor has more than one secured	Column A	Column B	
	h, list the creditor separately for each claim		Amount of claim	Value of collateral that supports this	
			Do not deduct the value of collateral.	claim	
2.1	First Citizens Bank & Trust Co	Describe debtor's property that is subject to a lien	\$338,241.76	\$800,000.00	
	Creditor's Name	3562 Habersham at Northlake			
	c/o CT Corporation System	Building J			
	1201 PEACHTREE STREET,	Tucker, GA 30084			
	N.E.				
	Atlanta, GA 30361				
	Creditor's mailing address	Describe the lien			
	3	First Mortgage			
		Is the creditor an insider or related party?			
		No			
	Creditor's email address, if known	Tes Yes			
		Is anyone else liable on this claim?			
	Date debt was incurred	□ No			
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Last 4 digits of account number				
	j				
	Do multiple creditors have an	As of the petition filing date, the claim is:			
	interest in the same property?	Check all that apply			
	□ No	Contingent			
	Yes. Specify each creditor,	Unliquidated			
	including this creditor and its relative priority.				
	1. First Citizens Bank &				
	Trust Co				
	2. First Citizens Bank &				
	Trust Co				
	3. First Citizens Bank &				
	Trust Co				
	4. First Citizens Bank &				
	Trust Co				
	5. Northlake Condo.				
	Assoc., Inc.				
	1				
2.2	First Citizens Bank & Trust		¢46 646 77	¢000 000 00	
	Со	Describe debtor's property that is subject to a lien	\$16,545.77	\$800,000.00	
	Creditor's Name	3562 Habersham at Northlake			
	c/o CT Corporation System	Building J			
	1201 PEACHTREE STREET,	Tucker, GA 30084			
	N.E.				

Atlanta, GA 30361 Creditor's mailing address

Official Form 206D

Describe the lien

Schedule D: Creditors Who Have Claims Secured by Property

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Debto	Family Works, Inc.	Document Page 13 of 35 Case number (íf know)	
	Name		· · ·	
		Second Mortgage		
		Is the creditor an insider or related party?		
_		No		
(Creditor's email address, if known	☐ Yes Is anyone else liable on this claim?		
	Date debt was incurred			
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
I	Last 4 digits of account number			
-	Do multiple creditors have an	As of the petition filing date, the claim is:		
	interest in the same property?	Check all that apply		
	No	Contingent		
	Yes. Specify each creditor, including this creditor and its relative			
I	priority.			
_	Specified on line 2.1			
	First Citizens Bank & Trust			
1/3/	Co	Describe debtor's property that is subject to a lien	\$34,919.97	\$800,000.00
	Creditor's Name	3562 Habersham at Northlake		
	c/o CT Corporation System	Building J		
	1201 PEACHTREE STREET,	Tucker, GA 30084		
	N.E. Atlanta, GA 30361			
	Creditor's mailing address	Describe the lien		
	C C	Non-Purchase Money Security		
		Is the creditor an insider or related party?		
		No		
(Creditor's email address, if known	☐ Yes		
		Is anyone else liable on this claim?		
	Date debt was incurred			
	Last 4 digits of account number	Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Do multiple creditors have an	As of the petition filing date, the claim is:		
	interest in the same property? □ _{No}	Check all that apply Contingent		
i	Yes. Specify each creditor, including this creditor and its relative			
I	priority.			
	Specified on line 2.1			
	First Citizens Bank & Trust			
2.4	Co	Describe debtor's property that is subject to a lien	\$21,699.92	\$800,000.00
	Creditor's Name	3562 Habersham at Northlake		
	c/o CT Corporation System	Building J		
	1201 PEACHTREE STREET,	Tucker, GA 30084		
	N.E. Atlanta, GA 30361			
	Creditor's mailing address	Describe the lien		
		Non-Purchase Money Security		
		Is the creditor an insider or related party?		
_		No		
(Creditor's email address, if known	□ Yes		
	Date debt was incurred	Is anyone else liable on this claim?		
I	Date uebi was incurreu			
	Last 4 digits of account number	Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
	Do multiple creditors have an	As of the petition filing date, the claim is:		
I	interest in the same property?	Check all that apply		

Official Form 206D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

	Case 17-57752-crm	Doc 1 Filed 05/01/17 Entered 05/01/ Document Page 14 of 35		esc Main
ebtor	Family Works, Inc.	Case number (i	f know)	
		Contingent		
	Yes. Specify each creditor, uding this creditor and its relative			
prio	ority.			
Sp	ecified on line 2.1			
La	eorgia Department of bor	Describe debtor's property that is subject to a lien	\$191.60	\$0.00
	ditor's Name 8 Andrew Young Inter. vd			
	om 738			
-	lanta, GA 30303	Base that the line		
Crea	ditor's mailing address	Describe the lien		
		Statutory Lien Is the creditor an insider or related party?		
		 No 		
Croc	ditor's email address, if known			
Cied		Is anyone else liable on this claim?		
Dat	e debt was incurred	■ No		
Dui		Yes, Fill out Schedule H: Codebtors (Official Form 206H)		
Las	at 4 digits of account number	Tes. Fill out Schedule H. Codebiors (Official Form 2007)		
	multiple creditors have an erest in the same property?	As of the petition filing date, the claim is: Check all that apply		
	Yes. Specify each creditor,			
	uding this creditor and its relative	Disputed		
No	orthlake Condo. Assoc.,		¢cc 704.09	¢800.000.00
Inc	ditor's Name	Describe debtor's property that is subject to a lien	\$66,724.08	\$800,000.00
	o Atlanta Comm. Serv.,	3562 Habersham at Northlake		
Inc		Building J Tucker, GA 30084		
44	,, 85 TENCH RD, STE 2511 wanee, GA 30024			
	ditor's mailing address	Describe the lien		
		Statutory Lien		
		Is the creditor an insider or related party?		
		No		
Crea	ditor's email address, if known	□ Yes		
		Is anyone else liable on this claim?		
Dat	e debt was incurred	No		
Las	at 4 digits of account number	Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
Do	multiple creditors have an	As of the petition filing date, the claim is:		
	erest in the same property?	Check all that apply		
	No			
	Yes. Specify each creditor,	Unliquidated		
incl	uding this creditor and its relative	Disputed		
	rity. ecified on line 2.1			

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

Official Form 206D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 4

Case 17-57752-crm	Doc 1	Filed 05/01/17	Entered 05/01/17 08:59:02	Desc Main
		Document F	Page 15 of 35	

Debtor	Family Works, Inc.
	Name

Case number (if know)

lf no c	thers need to notified for the debts listed in Part 1, do not fill out or submit this page. If additio	nal pages are needed, copy this pa	age.
	Name and address	On which line in Part 1 did	Last 4

you enter the related creditor? a

Last 4 digits of account number for this entity

Document Page 16 of 35	
Fill in this information to identify the case:	
Debtor name Family Works, Inc.	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number (if known)	Check if this is an amended filing
Official Form 206E/F Schedule E/F: Creditors Who Have Unsecured Claims	12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left, If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

1. Do any creditors have priority unsec	ured claims? (See 11 U.S.C. § 507).		
No. Go to Part 2.			
Yes. Go to line 2.			
	rs who have unsecured claims that are entitled to priority in whole nd attach the Additional Page of Part 1.	or in part. If the debtor has more	than 3 creditors
		Total claim	Priority amoun
1 Priority creditor's name and mailing ac Georgia Department of Reve Bankruptcy Section P.O. Box 161108 Atlanta, GA 30321		\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: Notice Only		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITN unsecured claim: 11 U.S.C. § 507(a) (
Priority creditor's name and mailing ac Internal Revenue Service CIO P.O. Box 7346 Philadelphia, PA 19101-7346	Check all that apply. Contingent Unliquidated	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: Notice Only		
Last 4 digits of account number	Is the claim subject to offset?		
Specify Code subsection of PRIORITN unsecured claim: 11 U.S.C. § 507(a) (

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

46630

Amount of claim

	DU	cument Page 17 01 35	
Debtor	Family Works, Inc.	Case number (if known)	
3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$900.00
	ADT Security Services, Inc. Corporation Trust Center 1209 Orange St. Wilmington, DE 19801 Date(s) debt was incurred	Contingent Contingent Unliquidated Disputed Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Nonpriority creditor's name and mailing address Herve Apollon 179-07 120th Avenue Jamaica, NY 11434-2717 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Unsecured Loan Is the claim subject to offset? ■ No □ Yes	\$100,000.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.

	Total of claim amounts				
5a.		\$	0.00		
5b.	+	\$	100,900.00		
5c.		\$	100,900.00		

Document Page 18 of 35	
Fill in this information to identify the case:	
Debtor name Family Works, Inc.	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number (if known)	
	Check if this is an amended filing
Official Form 206G	
Schedule G: Executory Contracts and Unexpired Leases	12/15
Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, nu	mber the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

□ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* Property (Official Form 206A/B).

2. List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	
2.2	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	
2.3	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	
2.4	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

	Document Page 19 of 35	-
Fill in this information to identify the	case:	
Debtor name Family Works, Inc.		
United States Bankruptcy Court for the	NORTHERN DISTRICT OF GEORGIA	
Case number (if known)		Check if this is an amended filing
Official Form 206H		

12/15

Official Form 206H Schedule H: Your Codebtors

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2. Column 1: Codebtor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	James Abel	1581 Grant Drive Atlanta, GA 30319	First Citizens Bank & Trust Co	■ D <u>2.1</u> □ E/F □ G
2.2	James Abel	1581 Grant Drive Atlanta, GA 30319	First Citizens Bank & Trust Co	■ D <u>2.2</u> □ E/F □ G
2.3	James Abel	1581 Grant Drive Atlanta, GA 30319	First Citizens Bank & Trust Co	■ D <u>2.3</u> □ E/F □ G
2.4	James Abel	1581 Grant Drive Atlanta, GA 30319	First Citizens Bank & Trust Co	■ D <u>2.4</u> □ E/F □ G

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 20 of 35

Fill in this information to identify the case: Debtor name Family Works, Inc.				
United States Bankruptcy Court for the: NORTHERN DISTRICT	I OF GEORGIA			
Case number (if known)				Check if this is an amended filing
Official Form 207				
Statement of Financial Affairs for Non The debtor must answer every question. If more space is need write the debtor's name and case number (if known).		-		04/16 any additional pages,
Part 1: Income				
1. Gross revenue from business				
None.				
Identify the beginning and ending dates of the debtor's f which may be a calendar year	fiscal year,	Sources of revenue Check all that apply		Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date):	Operating a business		\$269,000.00
From 1/01/2017 to Filing Date		Other		
For prior year:		Operating a business		\$273,015.00
From 1/01/2016 to 12/31/2016		Other		
For year before that: From 1/01/2015 to 12/31/2015		Operating a business		\$335,599.00
		Other		
 Non-business revenue Include revenue regardless of whether that revenue is taxable. and royalties. List each source and the gross revenue for each 				ney collected from lawsuits,
None.				
		Description of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Part 2: List Certain Transfers Made Before Filing for Bankr	ruptcy			
 Certain payments or transfers to creditors within 90 days I List payments or transfersincluding expense reimbursements filing this case unless the aggregate value of all property transf and every 3 years after that with respect to cases filed on or af 	sto any creditor, ferred to that cred	other than regular employee ditor is less than \$6,425. (This		
□ None.				
Creditor's Name and Address D	ates	Total amount of value	Reasons for Check all the	r payment or transfer at apply
			an an	

Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 21 of 35 Case 17-57752-crm

Debtor	Family	Works.	Inc
DODIOI	ιαιιιιν	WVUINS,	me.

4

5

6

- - -	55			
	Case	number	(if known)	

Debtor	Family Works, Inc.		Case number (if kn	own)	
С	reditor's Name and Address	Dates	Total amount of value	Reasons for pay Check all that app	
3.	 Northlake Condo. Assoc., Inc. c/o Atlanta Comm. Serv., Inc. 4485 TENCH RD, STE 2511 Suwanee, GA 30024 	February, 2017	\$5,000.00	Secured debt Unsecured loa Suppliers or ve Services Other	n repayments
3.	 Northlake Condo. Assoc., Inc. c/o Atlanta Comm. Serv., Inc. 4485 TENCH RD, STE 2511 Suwanee, GA 30024 	April, 2017	\$4,000.00	 Secured debt Unsecured loa Suppliers or ve Services Other 	
List or c may liste	ments or other transfers of property ma payments or transfers, including expense of osigned by an insider unless the aggregate be adjusted on 4/01/19 and every 3 years d in line 3. <i>Insiders</i> include officers, director tor and their relatives; affiliates of the debto	reimbursements, made within 1 y e value of all property transferred s after that with respect to cases f prs, and anyone in control of a co	rear before filing this case of to or for the benefit of the ir iled on or after the date of a rporate debtor and their rela	n debts owed to an in nsider is less than \$6 djustment.) Do not in tives; general partne	6,425. (This amount nolude any payments ers of a partnership
	None.				
	sider's name and address elationship to debtor	Dates	Total amount of value	Reasons for pay	ment or transfer
List	oossessions, foreclosures, and returns all property of the debtor that was obtained reclosure sale, transferred by a deed in liet				d by a creditor, sold a
	None				
С	reditor's name and address	Describe of the Property		Date	Value of property
	any creditor, including a bank or financial i ne debtor without permission or refused to r		5		•
	None				
С	reditor's name and address	Description of the action cr		Date action was taken	Amount
Part 3:	Legal Actions or Assignments				

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity-within 1 year before filing this case.

No	one.			
	Case title Case number	Nature of case	Court or agency's name and address	Status of case
•	ments and receivership			and a supervised of the based of the

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

8.

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Case 17-57752-crm	Doc 1	Filed 05/01/17	Entered 05/01/17 08:59:02	Desc Main
		Document F	Page 22 of 35	

Debtor Family Works, Inc.

Page 22 of 35 Case number (if known)

the gift	s to that recipient is less than \$1,000	debtor gave to a recipient within 2 years before fil 0	ing this case unless the	e aggregate value of
No		Description of the sifts or contributions	Dotoo giyon	Value
	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
art 5:	Certain Losses			
All loss	ses from fire, theft, or other casualty	within 1 year before filing this case.		
No	ne			
	ription of the property lost and the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.	Dates of loss	Value of property lost
		List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		
art 6:	Certain Payments or Transfers	AD. Assets – Rear and Fersonar Froperty).		
of this c		of property made by the debtor or person acting on being attorneys, that the debtor consulted about debt con		
of this c	case to another person or entity, includi r filing a bankruptcy case.			
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case.		nsolidation or restructurin	
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC	ng attorneys, that the debtor consulted about debt cor	nsolidation or restructurin	g, seeking bankruptcy Total amount of
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer,	ng attorneys, that the debtor consulted about debt cor	nsolidation or restructurin	g, seeking bankruptcy Total amount of
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225	ng attorneys, that the debtor consulted about debt cor	red Dates	g, seeking bankruptcy Total amount of value
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 Email or website address	If not money, describe any property transferr	red Dates	g, seeking bankruptcy Total amount of value
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 Email or website address willgeer@willgeerlaw.com Who made the payment, if not det Law Office of Will B. Geer,	If not money, describe any property transferr	red Dates	g, seeking bankruptcy Total amount of value
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 Email or website address willgeer@willgeerlaw.com Who made the payment, if not det Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE	If not money, describe any property transferr	red Dates	g, seeking bankruptcy Total amount of value
of this c relief, o	case to another person or entity, includi r filing a bankruptcy case. ne. Who was paid or who received the transfer? Address Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 Email or website address willgeer@willgeerlaw.com Who made the payment, if not det Law Office of Will B. Geer, LLC	If not money, describe any property transferr	red Dates	g, seeking bankruptcy Total amount of value

willgeer@willgeerlaw.com

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

ebtor _	Family Works, Inc.			
No	ne.			
Name	e of trust or device	Describe any property transferred	Dates transfers were made	Total amount o valu
List any 2 years	before the filing of this case to and	ement rty by sale, trade, or any other means made by the debtor o other person, other than property transferred in the ordinary as security. Do not include gifts or transfers previously liste	course of busines	ss or financial affairs. Include
No	ne.			
	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount o valu
art 7:	Previous Locations			
■ Do	es not apply Address		5.4.4	upapov
			Dates of occ	upancy
. Health Is the d - diagno - provid	Health Care Bankruptcies Care bankruptcies ebtor primarily engaged in offering osing or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9.	r disease, or	Dates of occ From-To	
. Health Is the d - diagno - provid	Care bankruptcies ebtor primarily engaged in offering osing or treating injury, deformity, o ing any surgical, psychiatric, drug t	r disease, or reatment, or obstetric care? Nature of the business operation, including type	From-To	If debtor provides meals
. Health Is the d - diagno - provid	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address	r disease, or reatment, or obstetric care?	From-To	If debtor provides meals and housing, number of
. Health Is the d - diagno - provid □ N ■ Y	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake	r disease, or rreatment, or obstetric care? Nature of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (From-To	If debtor provides meals and housing, number of patients in debtor's care
. Health Is the d - diagno - provid □ N ■ Y	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at	 In disease, or interestment, or obstetric care? Nature of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake Building J 	From-To	If debtor provides meals and housing, number of patients in debtor's care 42
. Health Is the d - diagno - provid □ N ■ Y	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake Building J	A disease, or treatment, or obstetric care? Nature of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake	From-To	If debtor provides meals and housing, number of patients in debtor's care 42 How are records kept?
Health Is the d - diagno - provid ■ N ■ Y 15.1.	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake Building J Tucker, GA 30084	A value of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake Building J Tucker, GA 30084	From-To	If debtor provides meals and housing, number of patients in debtor's care 42 How are records kept? Check all that apply:
. Health Is the d - diagno - provid ■ N ■ Y 15.1.	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake Building J Tucker, GA 30084	A value of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake Building J Tucker, GA 30084	From-To	If debtor provides meals and housing, number of patients in debtor's care 42 How are records kept? Check all that apply:
Health Is the d - diagno - provid ■ N ■ Y 15.1.	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake Building J Tucker, GA 30084	A disease, or reatment, or obstetric care? Nature of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake Building J Tucker, GA 30084 on onally identifiable information of customers?	From-To	If debtor provides meal and housing, number of patients in debtor's care 42 How are records kept? Check all that apply:
Health Is the d - diagno - provid ■ N ■ Y 15.1.	Care bankruptcies ebtor primarily engaged in offering using or treating injury, deformity, o ing any surgical, psychiatric, drug t lo. Go to Part 9. 'es. Fill in the information below. Facility name and address Family Works, Inc. 3562 Habersham at Northlake Building J Tucker, GA 30084 Personally Identifiable Information the debtor collect and retain personally.	A disease, or reatment, or obstetric care? Nature of the business operation, including type the debtor provides Mental Health Facility Location where patient records are maintained (facility address). If electronic, identify any service pr 3562 Habersham at Northlake Building J Tucker, GA 30084 on onally identifiable information of customers? tion collected and retained.	From-To	If debtor provides meals and housing, number of patients in debtor's care 42 How are records kept? Check all that apply:

Debtor Family Works, Inc.

Case number (if known)

profit-sharing plan made available by the debtor as an employee benefit?

- No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None				
Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

19. Safe deposit boxes

— ...

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

	Names of anyone with access to it Address	Description of the contents	Do you still have it?
--	---	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Debtor		se 17-57752-crm nily Works, Inc.		Filed 05/01/17 Document I	7 Entered Page 25 of 	05/01/17 08:59:02 De 35 ase number (if known)	sc Main
	No. Yes.	Provide details below.					
	ise titl ise nu			Court or agency na address	ame and M	Nature of the case	Status of case
		overnmental unit otherwis ntal law?	e notified the	e debtor that the deb	tor may be liabl	e or potentially liable under or in v	iolation of an
	No. Yes.	Provide details below.					
Sit	te nam	e and address		Governmental unit address	t name and	Environmental law, if known	Date of notice
24. Has	the de	btor notified any governm	ental unit of	f any release of haza	rdous material?		
	No. Yes.	Provide details below.					
Sit	te nam	e and address		Governmental unit address	t name and	Environmental law, if known	Date of notice
Part 13	Det	ails About the Debtor's Bu	isiness or C	onnections to Any B	usiness		
List a Inclu	any bu Ide this	nesses in which the debtor siness for which the debtor v information even if already	was an owne	r, partner, member, or	otherwise a pers	on in control within 6 years before fil	ing this case.
	None	ame address	Des	cribe the nature of th	o husiness	Employer Identification numbe	r
Bush	110001		200			Do not include Social Security number	
				ntained the debtor's bo	ooks and records	within 2 years before filing this case	
Na	ame ar	d address					e of service m-To
26	a.1.	Frank M. Henry PO Box 637 Gainesville, GA 30503				201	1 - Present
		firms or individuals who ha 2 years before filing this cas		ompiled, or reviewed c	lebtor's books of	account and records or prepared a f	inancial statement
	□ No						
		d address					e of service m-To
26	b.1.	Frank M. Henry PO Box 637 Gainesville, GA 30503				201	1 - Present
26c.	List all	firms or individuals who we	re in possess	sion of the debtor's boo	oks of account an	nd records when this case is filed.	
	□ No	ne					
Na	ame ar	d address				If any books of account and recount and	ords are

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Debtor Family Works, Inc. Page 26 of 35 ase number (if known)

Name and address

If any books of account and records are unavailable, explain why

26c.1.	Frank M. Henry PO Box 637
	Gainesville, GA 30503

26c.2. James Abel 1581 Grant Drive Atlanta, GA 30319

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

□ None

Name a	nd address
26d.1.	First Citizens Bank & Trust Co c/o CT Corporation System 1201 PEACHTREE STREET, N.E. Atlanta, GA 30361
26d.2.	Branch Banking and Trust Co. c/o CT Corporation 1201 Peachtree St., NE Atlanta, GA 30360
26d.3.	Baypoint Financial Services 1136 Pine Island Rd Cape Coral, FL 33909
26d.4.	Ann Schildhammer 1600 Parkwood Circle Suite 200 Atlanta, GA 30339

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the	Date of inventory	The dollar amount and basis (cost, market,
inventory		or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
James Abel	1581 Grant Drive Atlanta, GA 30319	CEO/President	100

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?



Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Debtor Family Works, Inc.	Page 27 of 35 Case number (if known)
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_	No Yes. Identify below.				
	Name and address of recipient	Amount of money or description and value property	ue of	Dates	Reason for providing the value
30.1	James Abel 1581 Grant Drive Atlanta, GA 30319	15,720.83		Last 365 days	Distributions
	Relationship to debtor Sole Owner				
1	6 years before filing this case, has th No	ne debtor been a member of any consolidate	ed group	for tax purposes?	
	Yes. Identify below.		Employ	ver Identification nur	where of the persons
Name o	of the parent corporation		corpora	er Identification nur ation	nder of the parent
1 ■	No Yes. Identify below.	ne debtor as an employer been responsible		ver Identification nur	
			corpora	ation	
WAR conne 18 U.S I have and co	ection with a bankruptcy case can result S.C. §§ 152, 1341, 1519, and 3571.	ime. Making a false statement, concealing pro in fines up to \$500,000 or imprisonment for up ment of Financial Affairs and any attachments a egoing is true and correct.	to 20 yea	ars, or both.	
Executed	on April 30, 2017	_			
/s/ Jame	s Abel of individual signing on behalf of the de	James Abel btor Printed name			
•	r relationship to debtor CEO				
		Affairs for Non-Individuals Filing for Bankro	uptcy (Of	ificial Form 207) atta	ched?

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		<u>ni Page 28 ol 35</u>	
mation to identify your	case:		
James Abel			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
			Check if this is an amended filing
	James Abel First Name First Name	mation to identify your case: James Abel First Name Middle Name First Name Middle Name	Mation to identify your case: James Abel First Name Middle Name First Name Middle Name Last Name Middle Name

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your as Value of	s sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	800,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	78,010.16
	1c. Copy line 63, Total of all property on Schedule A/B	\$	878,010.16
Par	2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		
2. 3.		Amount	you owe

	Your total liabilities	\$ 579,223.10
Par	t3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ N/A
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ N/A

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

☐ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 05/01/17 08:59:02 Desc Main Case 17-57752-crm Doc 1 Filed 05/01/17 Document

Debtor 1 Family Works, Inc.

29 of 35 Case number (if known) Page

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: 9.

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Official Form 106Sum

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 30 of 35

Fill in this infor				
Debtor 1	James Abel			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number				
(if known)				 k if this is an Ided filing

Official Form 106Dec Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
id you pay or agree to pay someone who is NOT an atto	rney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
uder nenalty of neriury. I declare that I have read the sum	nmary and schedules filed with this declaration and
nder penalty of perjury, I declare that I have read the sum at they are true and correct.	nmary and schedules filed with this declaration and
	nmary and schedules filed with this declaration and X
at they are true and correct.	
at they are true and correct. /s/ James Abel	X

12/15

Case 17-57752-crm

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Northern District of Georgia

In re	Family Works, Inc.		Case No.		
		Debtor(s)	Chapter	11	

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

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 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: a pre-petition retainer in the amount of \$20,000.00 for the Chapter 11 filing fee for fees and services to be rendered in respect to Bankruptcy matters, in which the Firm holds a security interest. The Firm is not a creditor and has not received any other payments from or on behalf of the Debtor except for the \$20,000.00 retainer, minus the filing fee, and minus any pre-petition earned services so as to ensure law firm is not a creditor of the debtor at the time of filing. For services rendered relating to the bankruptcy case, Debtor has agreed to pay fees billed at the normal hourly rates of the Law Office of Will B. Geer, LLC, for time expended on its behalf and may owe an additional amount should the actual fees and expenses exceed the retainer set forth above. Fees and expenses rendered during the pendency of the case are subject to court approval.

2. The source of the compensation paid to me was: Family Works, Inc.

✓ 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. prepare and file on behalf of the client all petitions, schedules, statements, plans, and other documents or pleadings;
- B. attend and represent the client at all meetings of creditors, hearings, trials, conferences, and other proceedings, whether in or out of court;
- C. provide legal advice to the client as to the rights, duties, and powers of the client as a debtor in possession in a chapter 11 case, and as to other matters arising in or related to the chapter 11 case; and
- D. otherwise assist, advise, and represent the client on matters related to the chapter 11 case as requested by the client

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.

April 30, 2017

Date

/s/ Will B. Geer

Will B. Geer 940493 Signature of Attorney Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 678-587-8740 Fax: 404-287-2767 willgeer@willgeerlaw.com Name of law firm Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 32 of 35

United States Bankruptcy Court

Northern District of Georgia

In re Family Works, Inc.

Debtor(s)

Case No. Chapter

11

Sole Owner

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 holderSecurity Class
Number of SecuritiesKind of Interest

James Abel 1581 Grant Drive Atlanta, GA 30319

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **CEO** 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 April 30, 2017

Signature /s/ James Abel James Abel

Penalty for making a false statement of 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 Northern District of Georgia

In re Family Works, Inc.

Debtor(s)

Case No. _ Chapter _

11

VERIFICATION OF CREDITOR MATRIX

I, the CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the

best of my knowledge.

Date: April 30, 2017

/s/ James Abel James Abel/CEO Signer/Title

Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 34 of 35

ADT Security Services, Inc. Corporation Trust Center 1209 Orange St. Wilmington, DE 19801

First Citizens Bank & Trust Co c/o CT Corporation System 1201 PEACHTREE STREET, N.E. Atlanta, GA 30361

Georgia Department of Labor 148 Andrew Young Inter. Blvd Room 738 Atlanta, GA 30303

Georgia Department of Revenue Bankruptcy Section P.O. Box 161108 Atlanta, GA 30321

Herve Apollon 179-07 120th Avenue Jamaica, NY 11434-2717

Internal Revenue Service CIO P.O. Box 7346 Philadelphia, PA 19101-7346

James Abel 1581 Grant Drive Atlanta, GA 30319

Northlake Condo. Assoc., Inc. c/o Atlanta Comm. Serv., Inc. 4485 TENCH RD, STE 2511 Suwanee, GA 30024 Case 17-57752-crm Doc 1 Filed 05/01/17 Entered 05/01/17 08:59:02 Desc Main Document Page 35 of 35

United States Bankruptcy Court Northern District of Georgia

In re **Family Works, Inc.**

Debtor(s)

Case No. Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for <u>Family Works, Inc.</u> in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

April 30, 2017

Date

/s/ Will B. Geer Will B. Geer 940493

Signature of Attorney or Litigant Counsel for Family Works, Inc. Law Office of Will B. Geer, LLC 333 Sandy Springs Circle, NE Suite 225 Atlanta, GA 30328 678-587-8740 Fax:404-287-2767 willgeer@willgeerlaw.com