

**United States Bankruptcy Court
DISTRICT OF IDAHO**

Voluntary Petition

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| Name of Debtor (if individual, enter Last, First, Middle): MARKUSON, Kurt J. | Name of Joint Debtor (Spouse)(Last, First, Middle): MARKUSON, Jennifer L. |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): NONE | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): NONE |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 6062 | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 7835 |
| Street Address of Debtor (No. & Street, City, and State): 7704 W. Iron Court Boise ID | Street Address of Joint Debtor (No. & Street, City, and State): 7704 W. Iron Court Boise ID |
| ZIPCODE 83704 | ZIPCODE 83704 |
| County of Residence or of the Principal Place of Business: Ada | County of Residence or of the Principal Place of Business: Ada |
| Mailing Address of Debtor (if different from street address): SAME | Mailing Address of Joint Debtor (if different from street address): SAME |
| ZIPCODE | ZIPCODE |
| Location of Principal Assets of Business Debtor (if different from street address above): NOT APPLICABLE | |
| ZIPCODE | |

| | | |
|--|---|---|
| Type of Debtor (Form of organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below <hr/> | Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose" <input type="checkbox"/> Debts are primarily business debts. <hr/> Chapter 11 Debtors: Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <hr/> Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). |
| Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | |

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| Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. <hr/> Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000 <hr/> Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion <hr/> Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion | THIS SPACE IS FOR COURT USE ONLY |
|---|----------------------------------|

| | | | |
|--|---|--|--|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): MARKUSON, Kurt J. and MARKUSON, Jennifer L. | |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) | | | |
| Location Where Filed: NONE | Case Number: | Date Filed: | |
| Location Where Filed: | Case Number: | Date Filed: | |
| Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) | | | |
| Name of Debtor: NONE | Case Number: | Date Filed: | |
| District: | Relationship: | Judge: | |
| <p style="text-align:center;">Exhibit A</p> (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) <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition</p> | <p style="text-align:center;">Exhibit B</p> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). <p>X <u>/s/ Kelly I. Beeman</u> 10/ 7/2008 Signature of Attorney for Debtor(s) Date</p> | | |
| Exhibit C | | | |
| Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? | | | |
| <input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No | | | |
| Exhibit D | | | |
| (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) | | | |
| <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. | | | |
| Information Regarding the Debtor - Venue (Check any applicable box) | | | |
| <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | | |
| Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) | | | |
| <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) | | | |
| _____ (Name of landlord that obtained judgment) | | | |
| _____ (Address of landlord) | | | |
| <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)). | | | |

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|---|---|
| <p>Voluntary Petition <i>(This page must be completed and filed in every case)</i></p> | <p>Name of Debtor(s): MARKUSON, Kurt J. and MARKUSON, Jennifer L.</p> |
| Signatures | |
| <p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>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.</p> <p>[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)</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ MARKUSON, Kurt J. _____ Signature of Debtor</p> <p>X /s/ MARKUSON, Jennifer L. _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (if not represented by attorney)</p> <p>10/ 7/2008 _____ Date</p> | <p style="text-align: center;">Signature of a Foreign Representative</p> <p>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.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed name of Foreign Representative)</p> <p>10/ 7/2008 _____ (Date)</p> |
| <p style="text-align: center;">Signature of Attorney*</p> <p>X /s/ Kelly I. Beeman _____ Signature of Attorney for Debtor(s)</p> <p>Kelly I. Beeman 1807 _____ Printed Name of Attorney for Debtor(s)</p> <p>Beeman Law Offices _____ Firm Name</p> <p>708 1/2 W. Franklin _____ Address</p> <p>Boise ID 83702 _____ City</p> <p>208-345-3045 _____ Telephone Number</p> <p>10/ 7/2008 _____ Date</p> <p><small>*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.</small></p> | <p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>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.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>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.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>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.</i></p> |
| <p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>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.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>10/ 7/2008 _____ Date</p> | |

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO**

In re *MARKUSON, Kurt J. and MARKUSON, Jennifer L.*Case No.
Chapter *11*

_____/ Debtor

SUMMARY OF SCHEDULES

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

| NAME OF SCHEDULE | Attached (Yes/No) | No. of Sheets | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|----------------------|----------------------|--------------------|
| A-Real Property | Yes | 1 | \$ 186,500.00 | | |
| B-Personal Property | Yes | 4 | \$ 55,280.25 | | |
| C-Property Claimed as Exempt | Yes | 1 | | | |
| D-Creditors Holding Secured Claims | Yes | 2 | | \$ 355,293.62 | |
| E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | \$ 5,000.00 | |
| F-Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | \$ 443,770.66 | |
| G-Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H-Codebtors | Yes | 1 | | | |
| I-Current Income of Individual Debtor(s) | Yes | 2 | | | \$ 9,333.00 |
| J-Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 7,306.00 |
| TOTAL | | 20 | \$ 241,780.25 | \$ 804,064.28 | |

UNITED STATES BANKRUPTCY COURT DISTRICT OF IDAHO

In re *MARKUSON, Kurt J. and MARKUSON, Jennifer L.*

Case No.
Chapter *11*

_____/ Debtor

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

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

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

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

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

| Type of Liability | Amount |
|---|----------------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 5,000.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 303,879.41 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 308,879.41 |

State the following:

| | |
|--|--------------|
| Average Income (from Schedule I, Line 16) | \$ 9,333.00 |
| Average Expenses (from Schedule J, Line 18) | \$ 7,306.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | \$ 10,000.00 |

State the following:

| | |
|--|---------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | \$ 125,483.62 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | \$ 5,000.00 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | \$ 0.00 |
| 4. Total from Schedule F | \$ 443,770.66 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | \$ 569,254.28 |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
Debtor

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 21 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 10/7/2008

Signature /s/ MARKUSON, Kurt J.
MARKUSON, Kurt J.

Date: 10/7/2008

Signature /s/ MARKUSON, Jennifer L.
MARKUSON, Jennifer L.

[If joint case, both spouses must sign.]

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.

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE A-REAL PROPERTY

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

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

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband--H Wife--W Joint--J Community--C | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|---|---|--|-------------------------|
| | | | | |
| TOTAL \$ | | | 186,500.00 | |

No continuation sheets attached

(Report also on Summary of Schedules.)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE B-PERSONAL PROPERTY

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

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

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | None | Description and Location of Property | Ownership | | | | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|--|------|--|------------|---------|----------|--------------|--|
| | | | Husband--H | Wife--W | Joint--J | Community--C | |
| 1. Cash on hand. | | <i>Cash on hand</i> <i>Location: In debtor's possession</i> | | | | C | \$ 10.00 |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | <i>Cash in personal checking account</i> <i>Location: In bank's possession</i> | | | | C | \$ 0.25 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | | | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | <i>Household good and furnishings - See Exhibit A</i> <i>Location: In debtor's possession</i> | | | | C | \$ 7,005.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | <i>Miscellaneous books and pictures</i> <i>Location: In debtor's possession</i> | | | | C | \$ 250.00 |
| 6. Wearing apparel. | | <i>Miscellaneous personal clothing</i> <i>Location: In debtor's possession</i> | | | | C | \$ 500.00 |
| 7. Furs and jewelry. | | <i>Wedding rings</i> <i>Location: In debtor's possession</i> | | | | C | \$ 600.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | | <i>Fishing Gear, Wii, 5 bicycles</i> <i>Location: In debtor's possession</i> | | | | C | \$ 300.00 |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | | | | |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
Debtor(s)

Case No. _____
(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N o n e | Description and Location of Property | Husband--H Wife--W Joint--J Community--C | | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|---|--|
| | | | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | | |
| 11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).) | X | | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | | <i>100 shares Riverwood Family Dental Care, PC and 100 shares Cascade Family Dentistry PC Location: In debtor's possession</i> | | C | \$ 0.00 |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | | |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | | |
| 16. Accounts Receivable. | X | | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property. | X | | | | |
| 20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | | <i>Dentistry License Location: In debtor's possession</i> | | C | Unknown |
| 24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | | |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N o n e | Description and Location of Property | | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|--|
| | | | Husband--H Wife--W Joint--J Community--C | |
| 25. Automobiles, trucks, trailers and other vehicles and accessories. | | <p><i>2000 Ford Taurus SE Sedan 4D</i> <i>Location: In debtor's possession</i></p> <p><i>2006 Ford Truck F250</i> <i>Location: In debtor's possession</i></p> <p><i>2007 Keystone Springdale Travel Trailer</i> <i>Location: In debtor's possession</i></p> | C C C | <p><i>\$ 4,255.00</i></p> <p><i>\$ 25,310.00</i></p> <p><i>\$ 17,000.00</i></p> |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | | <p><i>Office equipment, furnishings and inventory</i> <i>See Exhibit B attached hereto with regard to</i> <i>Creditor DeLage Landen Financial</i> <i>Location: In debtor's possession</i></p> <p><i>Office Equipment, inventory and supplies</i> <i>See Exhibit C attached hereto with regard to</i> <i>Creditor CitiCorp Vendor Financial</i> <i>Location: In debtor's possession</i></p> | C C | <p><i>Unknown</i></p> <p><i>Unknown</i></p> |
| 29. Machinery, fixtures, equipment and supplies used in business. | | <p><i>Office equipment, furnishings, inventory, supplies</i> <i>See Exhibits E, F, G attached hereto with regard to Creditor Patterson Dental Supply</i> <i>Location: In debtor's possession</i></p> | C | <p><i>Unknown</i></p> |
| 30. Inventory. | X | | | |
| 31. Animals. | | <p><i>Two older dogs</i> <i>Location: In debtor's possession</i></p> | C | <p><i>\$ 50.00</i></p> |
| 32. Crops - growing or harvested. Give particulars. | X | | | |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N o n e | Description and Location of Property | | Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|--|
| | | | Husband--H Wife--W Joint--J Community--C | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Total ➔ **\$ 55,280.25**

(Report total also on Summary of Schedules.)
 Include amounts from any continuation sheets attached.

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
Debtor(s)Case No. _____
(if known)**SCHEDULE C-PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

 Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

 11 U.S.C. § 522(b) (2) 11 U.S.C. § 522(b) (3)

| Description of Property | Specify Law Providing each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemptions |
|---|--|----------------------------|--|
| 7704 W. Iron Court, Boise, Idaho | Idaho Code §§55-1001, 55-1003 | \$ 100,000.00 | \$ 186,500.00 |
| Household good and furnishings | Idaho Code §11-605(1) (a) | \$ 7,005.00 | \$ 7,005.00 |
| Miscellaneous books and pictures | Idaho Code §11-605(1) (b) | \$ 250.00 | \$ 250.00 |
| Miscellaneous personal clothing | Idaho Code §11-605(1) (b) | \$ 500.00 | \$ 500.00 |
| Wedding rings | Idaho Code §11-605(2) | \$ 600.00 | \$ 600.00 |
| Fishing Gear, Wii, 5 bicycles | Idaho Code §11-605(7) IC 11-605(10) | \$ 300.00 \$ 0.00 | \$ 300.00 |
| 2000 Ford Taurus SE Sedan 4D | Idaho Code §11-605 (3) | \$ 4,255.00 | \$ 4,255.00 |
| 2006 Ford Truck F250 | Idaho Code §11-605 (3) | \$ 0.00 | \$ 25,310.00 |
| 2007 Keystone Springdale Travel Trailer | Idaho Code §11-605(3) | \$ 0.00 | \$ 17,000.00 |
| Two older dogs | Idaho Code §11-605(1) (b) | \$ 50.00 | \$ 50.00 |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Creditor's Name and Mailing Address Including ZIP Code and Account Number <i>(See Instructions Above.)</i> | Co-Debtor | Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien | Contingent | Unliquidated | Disputed | Amount of Claim Without Deducting Value of Collateral | Unsecured Portion, If Any |
|--|-----------|--|------------|--------------|----------|---|---------------------------|
| | | | | | | | |
| Account No: Creditor # : 1 Ada County Treasurer P.O. Box 2868 Boise ID 83701 | C | Value: \$ 0.00 | | | | \$ 0.00 | \$ 0.00 |
| Account No: 8213 Creditor # : 2 FireSide Bank PO Box 9080 Pleasanton CA 94566 | C | 5/07 Auto Loan 2007 Ford Truck F250 Value: \$ 25,310.00 | | | | \$ 34,044.50 | \$ 8,734.50 |
| Account No: 5103 Creditor # : 3 GMAC Mortgage Corporation P.O. Box 780 Waterloo IA 50704-0780 | C | 02/2004 Mortgage 7704 W. Iron Court, Boise, Idaho Value: \$ 186,500.00 | | | | \$ 234,000.00 | \$ 47,500.00 |
| Subtotal \$ (Total of this page) | | | | | | \$ 268,044.50 | \$ 56,234.50 |
| Total \$ (Use only on last page) | | | | | | | |

1 continuation sheets attached

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

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| Creditor's Name and Mailing Address Including ZIP Code and Account Number <i>(See Instructions Above.)</i> | Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien | Co-Debtor H--Husband W--Wife J--Joint C--Community | Contingent | Unliquidated | Disputed | Amount of Claim Without Deducting Value of Collateral | Unsecured Portion, If Any |
|--|---|--|------------|--------------|----------|---|---------------------------|
| | | | | | | | |
| Account No: Creditor # : 4 GMAC Mortgage, LLC 3451 Hammond Ave. Waterloo IA 50702 | C 6/10/08 Homesaver Advance 7704 W. Iron Court, Boise, Idaho Value: \$ 186,500.00 | | | | | \$ 11,248.06 | \$ 11,248.06 |
| Account No: Creditor # : 5 Patterson Dental Supply, Inc. 1031 Mendota Heights Road Saint Paul MN 55120 | C 2003 Dental equipment and software Exhibits E, F, G to Debtors' Schedule B Value: \$ 0.00 | | | | | \$ 58,001.06 | \$ 58,001.06 |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |
| Account No: | | | | | | | |

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors
 Holding Secured Claims

| | | |
|--|----------------------|----------------------|
| Subtotal \$ (Total of this page) | \$ 69,249.12 | \$ 69,249.12 |
| Total \$ (Use only on last page) | \$ 337,293.62 | \$ 125,483.62 |

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

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L. ,

Case No. _____

Debtor(s)

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: ***Taxes and Certain Other Debts Owed to Governmental Units***

| Creditor's Name, Mailing Address Including ZIP Code, and Account Number <i>(See instructions above.)</i> | Co-Debtor | Date Claim was Incurred and Consideration for Claim | Contingent | Unliquidated | Disputed | Amount of Claim | Amount Entitled to Priority | Amount not Entitled to Priority, if any |
|---|-----------|---|------------|--------------|----------|--------------------|-----------------------------------|--|
| | | | | | | | | |
| Account No: Creditor # : 1 IRS PO Box 21126 Philadelphia PA 19114 | C | 2007 <i>Income Taxes</i> <i>2006 and 2007 personal</i> <i>income taxes</i> | | | | \$ 5,000.00 | \$ 5,000.00 | \$ 0.00 |
| Account No: | | | | | | | | |
| Account No: | | | | | | | | |
| Account No: | | | | | | | | |
| Account No: | | | | | | | | |
| Account No: | | | | | | | | |
| Account No: | | | | | | | | |
| Subtotal \$ <small>(Total of this page)</small> | | | | | | 5,000.00 | 5,000.00 | 0.00 |
| Total \$ <small>(Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)</small> | | | | | | 5,000.00 | | |
| Total \$ <small>(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)</small> | | | | | | | 5,000.00 | 0.00 |

Sheet No. 1 of 1 continuation sheets attached
to Schedule of Creditors Holding Priority Claims

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|-----------|--|------------|--------------|----------|----------------------|
| | | | | | | |
| Account No: 72-3 Creditor # : 1 Access PO Box 24328 Louisville KY 40224-0328 | X C | Unknown Student Loan | | | | \$ 32,000.00 |
| Account No: 3572 Creditor # : 2 American Education Services Harrisburg PA 17130-0001 | C | 2/11/04 Student Loan | | | | \$ 235,279.41 |
| Account No: 2862 Creditor # : 3 Bank of America PO Box 15726 Wilmington DE 19886-5726 | C | Unknown Misc Expenses | | | | \$ 15,000.00 |
| Account No: 9665 Creditor # : 4 Bank of America PO Box 15026 Wilmington DE 19850 | C | Unknown Misc Expenses | | | | \$ 6,500.00 |
| Subtotal \$ | | | | | | \$ 288,779.41 |
| Total \$ | | | | | | |

4 continuation sheets attached

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor H--Husband W--Wife J--Joint C--Community | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. | Contingent | Unliquidated | Disputed | Amount of Claim |
|---|--|--|------------|--------------|----------|--------------------|
| | | | | | | |
| Account No: <i>nown</i> <i>Creditor # : 5</i> <i>Brent M. Wadsworth</i> <i>1522 S. Aspen Grove Street</i> <i>Nampa ID 83686</i> | C | 5/17/04 | | | | <i>Unknown</i> |
| Account No: <i>Creditor # : 6</i> <i>Capital 1 Bank</i> <i>PO Box 60024</i> <i>City of Industry CA 91716</i> | C | <i>Bank card</i> | | | | <i>\$ 624.00</i> |
| Account No: <i>3417</i> <i>Creditor # : 7</i> <i>Care Credit</i> <i>PO Box 960061</i> <i>Orlando FL 32896-0061</i> | C | <i>Unknown</i> <i>Misc Expenses</i> | | | | <i>\$ 3,400.00</i> |
| Account No: <i>8677</i> <i>Creditor # : 8</i> <i>Citi Bank</i> <i>P.O. Box 6000</i> <i>The Lakes NV 89163-6000</i> | C | <i>Unknown</i> <i>Misc Expenses</i> | | | | <i>\$ 5,400.00</i> |
| Account No: <i>1823</i> <i>Creditor # : 9</i> <i>Citi Bank Sears</i> <i>PO Box 45129</i> <i>Jacksonville FL 32232</i> | C | <i>Unknown</i> <i>Misc Expenses</i> | | | | <i>\$ 1,500.00</i> |
| Account No: <i>3761</i> <i>Creditor # : 10</i> <i>Citi Card Sears</i> <i>PO Box 45129</i> <i>Jacksonville FL 32232</i> | C | <i>Unknown</i> <i>Misc Expenses</i> | | | | <i>\$ 2,500.00</i> |

Sheet No. 1 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ *\$ 13,424.00*

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor H--Husband W--Wife J--Joint C--Community | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|--|--|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No: 9920 Creditor # : 11 Citi Cards Card Service Center PO Box 6077 Sioux Falls SD 57117-6077 | C | Unknown Misc Expenses | | | | \$ 4,500.00 |
| Account No: Creditor # : 12 CitiCorp Vendor Financial, Inc % Hawley, Troxell, Ennis PO Box 1617 Boise ID 83701 | C | Unknown financing agreement Lawsuit has been filed as Case No. CVOC08-13433, | | | X | \$ 69,056.39 |
| Account No: 1035 Creditor # : 13 De Lage Landen Financial Lease Processing Center 1111 Old Eagle School Road Wayne PA 19087 | C | 2005 Dental Equipment | | | | \$ 4,149.60 |
| Account No: 7835 Creditor # : 14 Direct Loans FSA PO Box 5609 Greenville TX 75403-5609 | C | Unknown Student Loan | | | | \$ 36,600.00 |
| Account No: 6337 Creditor # : 15 First Source PO Box 628 Buffalo NY 14240-0628 | C | Unknown Misc Expenses | | | | \$ 900.00 |
| Account No: 5651 Creditor # : 16 HFC 1415 N. Milwaukee Boise ID 83704 | C | Unknown Misc Expenses | | | | \$ 13,500.00 |

Sheet No. 2 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ \$ 128,705.99

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor H--Husband W--Wife J--Joint C--Community | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|--|--|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No: 7040 Creditor # : 17 Macy's/FDSB PO Box 8938 The Lakes NV 88901 | C | Unknown Misc Expenses | | | | \$ 2,600.00 |
| Account No: n, K Creditor # : 18 St. Al's Medical Group 3340 E. Goldstone Drive Meridian ID 83642-1026 | C | 8/23/06 Medical Bills | | | | \$ 251.38 |
| Account No: nown Creditor # : 19 St. Luke's P.O. Box 2777 Boise ID 83701 | C | 7/23/08 Medical Bills | | | | \$ 4,325.48 |
| Account No: Creditor # : 20 Steven K. Ricks 1560 N. Crestmont, Ste B Meridian ID 83642 | C | 2003 Office lease Guaranteed lease of Riverwood Family Dental Care office space | | | | \$ 0.00 |
| Account No: 6682 Creditor # : 21 Wells Fargo P.O. Box 98798 Las Vegas NV 89193-8798 | C | Unknown Misc Expenses | | | | \$ 700.00 |
| Account No: 5663 Creditor # : 22 Wells Fargo P.O. Box 98798 Las Vegas NV 89193-8798 | C | Unknown Misc Expenses | | | | \$ 700.00 |

Sheet No. 3 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 8,576.86**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,

Case No. _____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) | Co-Debtor H--Husband W--Wife J--Joint C--Community | Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. | Contingent | Unliquidated | Disputed | Amount of Claim |
|--|--|--|------------|--------------|----------|--------------------|
| | | | | | | |
| Account No: 9873 Creditor # : 23 Wells Fargo LA-Z-Boy P.O. Box 94498 Las Vegas NV 89193-4498 | C | Unknown Furniture Purchase | | | | \$ 2,500.00 |
| Account No: 9059 Creditor # : 24 Wells Fargo Visa PO Box 10347 Des Moines IA 50306 | C | Unknown Misc Expenses | | | | \$ 950.00 |
| Account No: 2787 Creditor # : 25 Women's Health Clinic 333 N. 1st Street, Ste. 240 Boise ID 83702 | C | 3/08 Obstetrical care | | | | \$ 834.40 |
| Account No: | | | | | | |
| Account No: | | | | | | |
| Account No: | | | | | | |

Sheet No. 4 of 4 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 4,284.40**

Total \$ **\$ 443,770.66**

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L. / Debtor

Case No. _____
(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

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

| Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract. | Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract. |
|---|---|
| <p><i>Cherry Lane Center</i> <i>1560 N. Crestmont Drive</i> <i>Suite B</i> <i>Meridian ID 83642</i></p> | <p>Contract Type: <i>Lease</i> Terms: <i>Seven years with two five year options to renew</i> Beginning date: <i>7/1/2003</i> Debtor's Interest: <i>Lessor</i> Description: <i>Commercial Building Lease</i> Buyout Option: <i>None</i></p> |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L. / Debtor

Case No. _____
(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if the debtor has no codebtors.

| Name and Address of Codebtor | Name and Address of Creditor |
|---|--|
| <p><i>Mick Markuson</i> <i>1871 N. Pilgrim Avenue</i> <i>Boise ID 83704</i></p> | <p><i>Access</i> <i>PO Box 24328</i> <i>Loiusville KY 40224-0328</i></p> |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

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

| Debtor's Marital Status: | DEPENDENTS OF DEBTOR AND SPOUSE | |
|--------------------------|---------------------------------|--------------|
| | RELATIONSHIP(S): | AGE(S): |
| Married | Daughter | 12 |
| | Son | 5 |
| | Son | 3 |
| | | weeks |

| EMPLOYMENT: | DEBTOR | SPOUSE |
|---------------------|--|--------|
| Occupation | Dentist | |
| Name of Employer | Cascade Family Dentistry | |
| How Long Employed | December of 2003 | |
| Address of Employer | 839 S. Main Street Cascade ID 83611 | |
| Occupation | Dentist | |
| Name of Employer | Riverwood Family Dental | |
| How Long Employed | August 2003 | |
| Address of Employer | 1558 N. Crestmont Drive, Ste. Meridian ID 83642 | |

| | DEBTOR | SPOUSE |
|---|--|---------|
| INCOME: (Estimate of average or projected monthly income at time case filed) | | |
| 1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) | \$ 5,000.00 | \$ 0.00 |
| 2. Estimate monthly overtime | \$ 0.00 | \$ 0.00 |
| 3. SUBTOTAL | \$ 5,000.00 | \$ 0.00 |
| 4. LESS PAYROLL DEDUCTIONS | | |
| a. Payroll taxes and social security | \$ 667.00 | \$ 0.00 |
| b. Insurance | \$ 0.00 | \$ 0.00 |
| c. Union dues | \$ 0.00 | \$ 0.00 |
| d. Other (Specify): | \$ 0.00 | \$ 0.00 |
| 5. SUBTOTAL OF PAYROLL DEDUCTIONS | \$ 667.00 | \$ 0.00 |
| 6. TOTAL NET MONTHLY TAKE HOME PAY | \$ 4,333.00 | \$ 0.00 |
| 7. Regular income from operation of business or profession or farm (attach detailed statement) | \$ 5,000.00 | \$ 0.00 |
| 8. Income from real property | \$ 0.00 | \$ 0.00 |
| 9. Interest and dividends | \$ 0.00 | \$ 0.00 |
| 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above. | \$ 0.00 | \$ 0.00 |
| 11. Social security or government assistance (Specify): | \$ 0.00 | \$ 0.00 |
| 12. Pension or retirement income | \$ 0.00 | \$ 0.00 |
| 13. Other monthly income (Specify): | \$ 0.00 | \$ 0.00 |
| 14. SUBTOTAL OF LINES 7 THROUGH 13 | \$ 5,000.00 | \$ 0.00 |
| 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) | \$ 9,333.00 | \$ 0.00 |
| 16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15) | \$ 9,333.00 | |
| | (Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data) | |

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.
Debtor(s)

Case No. _____
(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

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

In re MARKUSON, Kurt J. and MARKUSON, Jennifer L.,
 Debtor(s)

Case No. _____
 (if known)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

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

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

| | |
|--|-------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ 2,100.00 |
| a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| 2. Utilities: a. Electricity and heating fuel | \$ 190.00 |
| b. Water and sewer | \$ 50.00 |
| c. Telephone | \$ 0.00 |
| d. Other Trash Removal | \$ 25.00 |
| Other | \$ 0.00 |
| 3. Home maintenance (repairs and upkeep) | \$ 60.00 |
| 4. Food | \$ 900.00 |
| 5. Clothing | \$ 100.00 |
| 6. Laundry and dry cleaning | \$ 500.00 |
| 7. Medical and dental expenses | \$ 100.00 |
| 8. Transportation (not including car payments) | \$ 200.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ 50.00 |
| 10. Charitable contributions | \$ 100.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | |
| a. Homeowner's or renter's | \$ 0.00 |
| b. Life | \$ 144.00 |
| c. Health | \$ 300.00 |
| d. Auto | \$ 206.00 |
| e. Other Trailer Insurance | \$ 9.00 |
| Other Kurt's Disability | \$ 107.00 |
| 12. Taxes (not deducted from wages or included in home mortgage) (Specify) S Corp Income Taxes | \$ 1,500.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | |
| a. Auto | \$ 0.00 |
| b. Other: Travel Trailer payment | \$ 249.00 |
| c. Other: | \$ 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ 0.00 |
| 17. Other: Pet Care and Supplies | \$ 30.00 |
| Other: Private School for Children | \$ 386.00 |
| | 0.00 |
| 18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ 7,306.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | |
| 20. STATEMENT OF MONTHLY NET INCOME | |
| a. Average monthly income from Line 16 of Schedule I | \$ 9,333.00 |
| b. Average monthly expenses from Line 18 above | \$ 7,306.00 |
| c. Monthly net income (a. minus b.) | \$ 2,027.00 |

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO**

In re: **MARKUSON, Kurt J.**
and
MARKUSON, Jennifer L.

Case No.

STATEMENT OF FINANCIAL AFFAIRS

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

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

DEFINITIONS

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

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

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

Year to date: \$70000

Riverwood Family Dental and Cascade Family Dentistry

Last Year: \$82839

Year before: \$71023

2. Income other than from employment or operation of business

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

3. Payments to creditors

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

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

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|--------------------------------------|-------------------|-------------------|---|
| <i>Creditor: Kelly I. Beeman</i> | <i>7/9/08</i> | <i>\$1,000.00</i> | |
| <i>Address: 708 1/2 W. Franklin,</i> | <i>5/6/08</i> | <i>\$150.00</i> | |
| <i>Boise, Idaho 83702</i> | <i>5/30/08</i> | <i>\$1,000.00</i> | <i>Debt forgiven and money returned to debtors on 8/13/08</i> |

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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

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

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

| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
|--|------------------------|---|-----------------------|
| <i>Citicorp Vendor Finance, Inc. v. Kurt J. Markuson Case NO. CVOC 08-13433</i> | <i>Civil Complaint</i> | <i>Fourth Judicial District, Idaho</i> | <i>Pending</i> |
| <i>De Lage Landen Financial Services v. Riverwood Family Dental Care, PC., et al Case No. 08-07274</i> | <i>Civil Complaint</i> | <i>Court of Commons Pleas, Chester County, PA</i> | <i>Pending</i> |

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

5. Repossessions, foreclosures and returns

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

6. Assignments and receiverships

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

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

7. Gifts

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

8. Losses

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

9. Payments related to debt counseling or bankruptcy

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

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|---|---|
| <i>Payee: Kelly I. Beeman Address: 708 1/2 W. Frankin Boise, ID 83702</i> | <i>Date of Payment: July 30, 2008 Payor: MARKUSON, Kurt J.</i> | <i>\$6000.00</i> |
| <i>Payee: Allen Credit Address: South Dakota</i> | <i>Date of Payment: Sept 9 and 10 Payor: Kurt and Jennifer Markuson</i> | <i>\$75 for Credit Counseling Certificates</i> |

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by

either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

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

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---|---|------------------------------------|
| <i>Institution:Bank of America Address:Boise, Idaho</i> | <i>Account Type and No.:Checking Account Final Balance:Unknown but closed</i> | <i>Unknown but 11/07</i> |

| | | |
|---|---|------------------------------------|
| <i>Institution:Key Bank Address:Eagle, ID</i> | <i>Account Type and No.:Checking, Account No. 122782019741 Final Balance:Closed with no balance</i> | <i>No balance as at 09/10/2008</i> |
|---|---|------------------------------------|

12. Safe deposit boxes

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

13. Setoffs

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

14. Property held for another person

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

15. Prior address of debtor

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

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|--|---|--|
| <p><i>Debtor: Kurt and Jennifer Markuson</i> <i>Address: 665 S. Torino, Meridian, Idaho</i></p> | <p><i>Name(s): Kurt and Jennifer Markuson</i></p> | <p><i>June 2003 to February 2007</i></p> |

16. Spouses and Former Spouses

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

17. Environmental Information

None For the purpose of this question, the following definitions apply:

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

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

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

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

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

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

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

| NAME | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |
|-----------------------------------|--|---|----------------------|----------------------------|
| <i>Riverwood Family Dental PC</i> | <i>ID: 73-1669038</i> | <i>1558 N. Crestmont Dr., Suite A Meridian, Idaho 83642</i> | <i>Dental Clinic</i> | |
| <i>Cascade Family Dentistry</i> | <i>ID: 20-0455938</i> | <i>839 S. Main Street Cascade, Idaho</i> | <i>Dental Clinic</i> | |

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

[If completed by an individual or individual and spouse]

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

Date 10/ 7/2008

Signature /s/ MARKUSON, Kurt J.
of Debtor

Date 10/ 7/2008

Signature /s/ MARKUSON, Jennifer L.
of Joint Debtor
(if any)

UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO

In re *MARKUSON, Kurt J.*
and
MARKUSON, Jennifer L.

Case No.
Chapter *11*

/ Debtor

Attorney for Debtor: *Kelly I. Beeman*

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: *10/ 7/2008*

/s/ MARKUSON, Kurt J.

Debtor

/s/ MARKUSON, Jennifer L.

Joint Debtor

Access
PO Box 24328
Louisville, KY 40224-0328

Ada County Treasurer
P.O. Box 2868
Boise, ID 83701

Brent M. Wadsworth
1522 S. Aspen Grove Street
Nampa, ID 83686

Capital 1 Bank
PO Box 60024
City of Industry, CA 91716

Cherry Lane Center
1560 N. Crestmont Drive
Suite B
Meridian, ID 83642

Citi Bank Sears
PO Box 45129
Jacksonville, FL 32232

Direct Loans FSA
PO Box 5609
Greenville, TX 75403-5609

First Source
PO Box 628
Buffalo, NY 14240-0628

HFC
1415 N. Milwaukee
Boise, ID 83704

Macy's/FDSB
PO Box 8938
The Lakes, NV 88901

Mick Markuson
1871 N. Pilgrim Avenue
Boise, ID 83704

St. Al's Medical Group
3340 E. Goldstone Drive
Meridian, ID 83642-1026

Steven K. Ricks
1560 N. Crestmont, Ste B
Meridian, ID 83642

Thor Credit
PO Box 57091
Irvine, CA 92619

Wells Fargo
P.O. Box 98798
Las Vegas, NV 89193-8798

Wells Fargo Visa
PO Box 10347
Des Moines, IA 50306

Women's Health Clinic
333 N. 1st Street, Ste. 240
Boise, ID 83702

Access
Meridian, ID

American Education Services
Harrisburg, PA 17130-0001

Bank of America
PO Box 15026
Wilmington, DE 19850

Bank of America
PO Box 15726
Wilmington, DE 19886-5726

Care Credit
PO Box 960061
Orlando, FL 32896-0061

Citi Bank
P.O. Box 6000
The Lakes, NV 89163-6000

Citi Card Sears
PO Box 45129
Jacksonville, FL 32232

Citi Cards
Card Service Center
PO Box 6077
Sioux Falls, SD 57117-6077

CitiCorp Vendor Financial, I
Hawley, Troxell, Ennis
PO Box 1617
Boise, ID 83701

De Lage Landen Financial
Lease Processing Center
1111 Old Eagle School Road
Wayne, PA 19087

Direct Loans FSA

FireSide Bank
PO Box 9080
Pleasanton, CA 94566

GMAC Mortgage Corporation
P.O. Box 780
Waterloo, IA 50704-0780

GMAC Mortgage, LLC
3451 Hammond Ave.
Waterloo, IA 50702

HIC
PO Box 60101
City of Industry, CA 91716-

IRS
PO Box 21126
Philadelphia, PA 19114

Macy's/FDSB
POBox 8938
The Lakes, NV 88901

Patterson Dental Supply, Inc
1031 Mendota Heights Road
Saint Paul, MN 55120

St. Luke's
P.O. Box 2777
Boise, ID 83701

Wells Fargo LA-Z-Boy
P.O. Box 94498
Las Vegas, NV 89193-4498