B1 (Official	Form 1)(1/	08)										
			United thern Di								Voluntary	Petition
	ebtor (if ind Isen, Jam		er Last, First	, Middle):				Name of Joint Debtor (Spouse) (Last, First, Middle): Wellhausen, Karen L				
	All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):									Joint Debtor i trade names	in the last 8 years	
	one, state all)		vidual-Taxp	ayer I.D. ((ITIN) No./	Complete E	(if mo	Our digits on that one, s	tate all)	r Individual-7	Гахрауег I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. and Street, City, and State): 1451 Champion Forest Ct. Wheaton, IL ZIP Code					Street 14 W	Address of	Joint Debtor		reet, City, and State):	ZIP Code		
		of the Prin	cipal Place o	f Business		60187		-	ence or of the	Principal Pla	ace of Business:	60187
Dupage		stor (if diffo	rent from str	east address	20):			page	of Joint Dahi	tor (if differen	nt from street address):	
Mannig Au	uress of Dec	nor (ir dirre	rent from su	eet addres	55).	ZID Codo		iig Address	or Joint Deol	tor (ir differen	iit from street address).	
						ZIP Code						ZIP Code
Location of (if different			siness Debtor ve):	r								
Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)			Sing in I Rail Stoc	(Check Ith Care Bu gle Asset Ro I U.S.C. § road ekbroker nmodity Bro aring Bank er Tax-Exe	eal Estate as 101 (51B) bker mpt Entity , if applicable exempt orgof the Unite	e) anization d States	defined	er 7 er 9 er 11 er 12 er 13 are primarily cod in 11 U.S.C. 3 ed by an indiv.	Petition is Fi	busin	decognition eding decognition	
Filing For attach si is unable	gned applicate to pay fee	hed I in installmation for the except in in	nents (applicate court's consistallments. I	able to ind sideration Rule 1006	certifying t (b). See Offi	hat the debt	Check	Debtor is k if: Debtor's	a small busin not a small b aggregate not s or affiliates)	usiness debto	defined in 11 U.S.C. § or as defined in 11 U.S iquidated debts (excluding	.C. § 101(51D).
			e court's cons	sideration.	. See Official	Form 3B.		Acceptan	ces of the pla	accordance v	ted prepetition from on vith 11 U.S.C. § 1126(b).
Debtor e	estimates that estimates that	t funds will it, after any	ation be available exempt prop for distribut	erty is ex	cluded and	administrat		es paid,		THIS	SPACE IS FOR COURT	USE ONLY
Estimated N	Number of C 50- 99	reditors 100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				
Estimated L \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion				

B1 (Official Form 1)(1/08) Page 2

Voluntary	Petition	Name of Debtor(s):			
(This nage mus	st be completed and filed in every case)	Wellhausen, James A Wellhausen, Karen L			
(Ims page mas	All Prior Bankruptcy Cases Filed Within Last	l '	ditional sheet)		
Location		Case Number:	Date Filed:		
Where Filed:	- None -				
Location Where Filed:		Case Number:	Date Filed:		
	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debto	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A	(To be completed if debtor is an individual	hibit B whose debts are primarily consumer debts.)		
forms 10K ar pursuant to S and is reques	eted if debtor is required to file periodic reports (e.g., ad 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	have informed the petitioner that [he of 12, or 13 of title 11, United States Codunder each such chapter. I further certification for the control of the con	in the foregoing petition, declare that I r she] may proceed under chapter 7, 11, e, and have explained the relief available fy that I delivered to the debtor the notice		
☐ Exhibit A	A is attached and made a part of this petition.	Signature of Attorney for Debtor(s)	(Date)		
		bigilature of rittorney for Bestor(8)	(Bute)		
	Fyh	<u>l</u> ibit C			
	own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.		harm to public health or safety?		
_	eted by every individual debtor. If a joint petition is filed, early completed and signed by the debtor is attached and made	•	separate Exhibit D.)		
_	D also completed and signed by the joint debtor is attached a	and made a part of this petition.			
	Information Regardin	g the Debtor - Venue			
	(Check any ap				
	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for				
	There is a bankruptcy case concerning debtor's affiliate, ge				
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendar ne interests of the parties will be serve	nt in an action or d in regard to the relief		
	Certification by a Debtor Who Reside (Check all app		ty		
	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)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f				
	Debtor has included in this petition the deposit with the coafter the filing of the petition.				
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(l)).			

B1 (Official Form 1)(1/08)

Page 3

Voluntary Petition

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

Signatures

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

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

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

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

X /s/ James A Wellhausen

Signature of Debtor James A Wellhausen

X /s/ Karen L Wellhausen

Signature of Joint Debtor Karen L Wellhausen

Telephone Number (If not represented by attorney)

October 20, 2008

Date

Signature of Attorney*

X /s/ Michael J. Davis

Signature of Attorney for Debtor(s)

Michael J. Davis 6197896

Printed Name of Attorney for Debtor(s)

Springer, Brown, Covey, Gaertner & Davis, L.L.C.

Firm Name

400 S. County Farm Road Suite 330 Wheaton, IL 60187

Address

630-510-0000 Fax: 630-510-0004

Telephone Number

October 20, 2008

Date

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

Signature of Debtor (Corporation/Partnership)

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

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

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

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

(Check only one box.)

Name of Debtor(s):

Wellhausen, James A Wellhausen, Karen L

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

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

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

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

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

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

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court

	Northern District of Illinois, Eastern Division					
In re	James A Wellhausen Karen L Wellhausen	Debtor(s)	_ Case No. Chapter	11		
	EXHIBIT D - INDIVIDUAL I CREDIT		OF COMPLI			
can di credit anoth	Warning: You must be able to che eling listed below. If you cannot do ismiss any case you do file. If that hors will be able to resume collection er bankruptcy case later, you may steps to stop creditors' collection ac	eck truthfully one of the five o so, you are not eligible to fil nappens, you will lose whatev n activities against you. If yo be required to pay a second	statements i e a bankrup er filing fee ur case is dis	tcy case, and the court you paid, and your missed and you file		
and fil	Every individual debtor must file th le a separate Exhibit D. Check one of	v v 1	•			
opport a certi	■ 1. Within the 180 days before t teling agency approved by the United tunities for available credit counseling ficate from the agency describing the debt repayment plan developed through	States trustee or bankruptcy acg and assisted me in performing services provided to me. <i>Attachment</i>	lministrator thing a related bu	hat outlined the adget analysis, and I have		
opport not ha certific	□ 2. Within the 180 days before the thing agency approved by the United tunities for available credit counseling agency describing the agency describing the supped through the agency no later than	States trustee or bankruptcy acg and assisted me in performing the services provided to services provided to you and a	Iministrator that a related by me. You mus copy of any of	hat outlined the adget analysis, but I do t file a copy of a lebt repayment plan		
circun	☐ 3. I certify that I requested credit the services during the five days from stances merit a temporary waiver of Must be accompanied by a motion for	m the time I made my request, the credit counseling requirem	and the folloment so I can f	wing exigent ille my bankruptcy case		

here.] ____

Official Form 1, Exh. D (10/06) - Cont.

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

receiving a credit counseling briefing, your case may be distinssed.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ James A Wellhausen James A Wellhausen
Date: October 20, 2008

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court

	Northern District of Illinois, Eastern Division					
In re	James A Wellhausen Karen L Wellhausen	Debtor(s)	_ Case No. Chapter	11		
	EXHIBIT D - INDIVIDUAL I CREDIT		OF COMPLI			
can di credit anoth	Warning: You must be able to che eling listed below. If you cannot do ismiss any case you do file. If that hors will be able to resume collection er bankruptcy case later, you may steps to stop creditors' collection ac	eck truthfully one of the five o so, you are not eligible to fil nappens, you will lose whatev n activities against you. If yo be required to pay a second	statements i e a bankrup er filing fee ur case is dis	tcy case, and the court you paid, and your missed and you file		
and fil	Every individual debtor must file th le a separate Exhibit D. Check one of	v v 1	•			
opport a certi	■ 1. Within the 180 days before t teling agency approved by the United tunities for available credit counseling ficate from the agency describing the debt repayment plan developed through	States trustee or bankruptcy acg and assisted me in performing services provided to me. <i>Attachment</i>	lministrator thing a related bu	hat outlined the adget analysis, and I have		
opport not ha certific	□ 2. Within the 180 days before the thing agency approved by the United tunities for available credit counseling agency describing the agency describing the supped through the agency no later than	States trustee or bankruptcy acg and assisted me in performing the services provided to services provided to you and a	Iministrator that a related by me. You mus copy of any of	hat outlined the adget analysis, but I do t file a copy of a lebt repayment plan		
circun	☐ 3. I certify that I requested credit the services during the five days from stances merit a temporary waiver of Must be accompanied by a motion for	m the time I made my request, the credit counseling requirem	and the folloment so I can f	wing exigent ille my bankruptcy case		

here.] ____

Official Form 1, Exh. D (10/06) - Cont.

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

receiving a credit counseling briefing, your case may be dismissed.
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: // // Karen L Wellhausen Karen L Wellhausen
Date: October 20, 2008

B4 (Official Form 4) (12/07)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

	James A Wellhausen			
In re	Karen L Wellhausen		Case No.	
		Debtor(s)	Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
AT & T Universal Card P.O. Box 688909 Des Moines, IA 50368-8909	AT & T Universal Card P.O. Box 688909 Des Moines, IA 50368-8909	Trade debt		23,012.42
Bank of America Visa P.O. Box 15710 Wilmington, DE 19886-5710	Bank of America Visa P.O. Box 15710 Wilmington, DE 19886-5710	Trade debt		19,956.49
Capitol One Bank (USA), N.A. P.O. Box 5294 Carol Stream, IL 60197-5294	Capitol One Bank (USA), N.A. P.O. Box 5294 Carol Stream, IL 60197-5294	Trade debt		5,191.66
Chase Bank One Cardmember Service PO Box 15153 Wilmington, DE 19886-5153	Chase Bank One Cardmember Service PO Box 15153 Wilmington, DE 19886-5153	Trade debt		5,782.89
Discover P.O. 30395 Salt Lake City, UT 84130	Discover P.O. 30395 Salt Lake City, UT 84130	Trade debt		14,973.14
DuPage County Collector c/o Gwen Henry, CPA P.O. Box 787 Wheaton, IL 60187-0787	DuPage County Collector c/o Gwen Henry, CPA P.O. Box 787 Wheaton, IL 60187-0787	Taxes		10,844.98
Green Couunty Treasurer c/o Sherril Hawkins 1016 16th Avenue Monroe, WI 53566	Green Couunty Treasurer c/o Sherril Hawkins 1016 16th Avenue Monroe, WI 53566	Taxes		5,672.40
HSCB Card Services P.O. Box 37281 Baltimore, MD 21297-3281	HSCB Card Services P.O. Box 37281 Baltimore, MD 21297-3281	Trade debt		4,909.63
Old Navy Visa P.O. Box 960017 Orlando, FL 32896-0017	Old Navy Visa P.O. Box 960017 Orlando, FL 32896-0017	Trade debt		5,137.32

B4 (Offic	cial Form 4) (12/07) - Cont.
	James A Wellhausen
In re	Karen L Wellhausen

	Case No.	
Debtor(s)		

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

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

We, **James A Wellhausen** and **Karen L Wellhausen**, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date	October 20, 2008	Signature	/s/ James A Wellhausen	
			James A Wellhausen	
			Debtor	
Date	October 20, 2008	Signature	/s/ Karen L Wellhausen	
			Karen L Wellhausen	
			Joint Debtor	

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

In re	James A Wellhausen,
	Karen L Wellhausen

Debtors

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

pric	on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to prity 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 laso 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.
ГΥ	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
\Box	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 uch 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).
\Box	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 tee or the order for relief. 11 U.S.C. § 507(a)(3).
\Box	Wages, salaries, and commissions
repi	Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales resentatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever urred first, to the extent provided in 11 U.S.C. § 507(a)(4).
\Box	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 chever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
\Box	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).
\Box	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 the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

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

1 contin	nuation s	sheets	attached
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^{*} 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	James A Wellhausen,
	Karen I Wellhausen

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR NL I QUI DATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) Account No. 01-36-407-002 06/02/2008-09/02/2008 Taxes **DuPage County Collector** 0.00 c/o Gwen Henry, CPA P.O. Box 787 J Wheaton, IL 60187-0787 10,844.98 10,844.98 Account No. 23 18 23 0.5000 09/03/2008 Taxes **Green Couunty Treasurer** 0.00 c/o Sherril Hawkins 1016 16th Avenue J Monroe, WI 53566 5,672.40 5,672.40 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 16,517.38 Schedule of Creditors Holding Unsecured Priority Claims 16,517.38 0.00

(Report on Summary of Schedules)

16,517.38

16,517.38

In re	James A Wellhausen,		Case No	
	Karen L Wellhausen		_•	
_		Debtors	_,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

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

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	LIQUI	DISPUTED	S J	AMOUNT OF CLAIM
Account No. 5491-1303-5023-9760			11/03/2008	Ť	Ť			
AT & T Universal Card P.O. Box 688909 Des Moines, IA 50368-8909		J	Trade debt		D			23,012.42
Account No. 4170-0802-0020-0952			10/28/2008	T	T	T	Ť	
Bank of America Visa P.O. Box 15710 Wilmington, DE 19886-5710		J	Trade debt					19,956.49
Account No. 5178-0524-4295-2699		\vdash	10/24/2008	\vdash	╁	├	+	-,
Capitol One Bank (USA), N.A. P.O. Box 5294 Carol Stream, IL 60197-5294		J	Trade debt					5,191.66
Account No. 4266-8410-9922-6118			10/17/2008	T	T	T	Ť	
Chase Bank One Cardmember Service PO Box 15153 Wilmington, DE 19886-5153		J	Trade debt					5,782.89
			<u> </u>	Sub	⊥ tota	ı l	†	
continuation sheets attached			(Total of t	his	pag	ge)	,	53,943.46

In re	James A Wellhausen,	Case No.	_
	Karen L Wellhausen		

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

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	D	н	DATE CLAIM WAS INCURRED AND	N	Ļ	DISPUTE	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	W J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	Ü	AMOUNT OF CLAIM
(See instructions above.)	CODEBTOR	c	IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	Ĭ	Ė	AWOUNT OF CLAIM
	Ľ	_		۱	DATED	١	
Account No.	ļ		10/12/2008	'	Ę		
			Trade debt	-	D		
Discover		١.					
P.O. 30395		J					
Salt Lake City, UT 84130							
							14,973.14
Account No. 5499-4410-0769-6761			10/14/2008				
	1		Trade debt				
HSCB Card Services							
P.O. Box 37281		J					
Baltimore, MD 21297-3281							
,							
							4,909.63
	_			-			1,00000
Account No. 4479-9516-1730-5113			11/01/2008				
			Trade debt				
Old Navy Visa		١.					
P.O. Box 960017		J					
Orlando, FL 32896-0017							
							5,137.32
Account No.				T			
	l						
	┞			+			
Account No.	l						
	L			1	L	L	
Sheet no1 of _1 sheets attached to Schedule of			Subtotal			1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				25,020.09
Titles Titles of State of Trompholicy Chamb			(Tomi of t				
					ota		70 062 55
			(Report on Summary of So	chec	lule	es)	78,963.55

Allied Asset and Recovery

Amcore Bank 1210 S. Alpine Rd. Rockford, IL 61108

AT & T Universal Card P.O. Box 688909 Des Moines, IA 50368-8909

Bank of America Visa P.O. Box 15710 Wilmington, DE 19886-5710

Capital One Bank (USA) P.O. Box 5463 Chicago, IL 60680-5463

Capitol One Bank (USA), N.A. P.O. Box 5294 Carol Stream, IL 60197-5294

Chase Bank One Cardmember Service PO Box 15153 Wilmington, DE 19886-5153

Citi Residential Lending P.O. 5926 Carol Stream, IL 60197

Community Bank Wheaton Glen Ellyn 100 N. Wheaton Ave. Wheaton, IL 60187

Discover P.O. 30395 Salt Lake City, UT 84130

DuPage County Collector c/o Gwen Henry, CPA P.O. Box 787 Wheaton, IL 60187-0787 Green Couunty Treasurer c/o Sherril Hawkins 1016 16th Avenue Monroe, WI 53566

HSCB Card Services P.O. Box 37281 Baltimore, MD 21297-3281

Itasca State Bank 308 W. Irving Park Rd. Itasca, IL 60143

Manchester Nursery

Old Navy Visa P.O. Box 960017 Orlando, FL 32896-0017

Pallet makers

Transon Amusements

Wellhausen Group Inc. 27 W 061 St. Charles Rd. Carol Stream, IL 60188