

B1 (Official Form 1)(4/10)

<b>United States Bankruptcy Court</b> <b>Northern District of Illinois</b>		<b>Voluntary Petition</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>Imperial Elevator Services, Inc.</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>36-4228065</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)	
Street Address of Debtor (No. and Street, City, and State): <b>6650 N. Northwest Highway</b> <b>Suite 106</b> <b>Chicago, IL</b> <div style="text-align: right;">ZIP Code <b>60631</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP Code</div>	
County of Residence or of the Principal Place of Business: <b>Cook</b>		County of Residence or of the Principal Place of Business:	
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>	
Location of Principal Assets of Business Debtor (if different from street address above):			
<b>Type of Debtor</b> (Form of Organization) (Check one box)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" 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.)		<b>Nature of Business</b> (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 checked="" type="checkbox"/> Other <hr/> <b>Tax-Exempt Entity</b> (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).	
<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (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		<b>Nature of Debts</b> (Check one box)  <input 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 checked="" type="checkbox"/> Debts are primarily business debts.	
<b>Filing Fee</b> (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.		<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor 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). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). 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).	
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input 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.		THIS SPACE IS FOR COURT USE ONLY	
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input checked="" 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			
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input 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			
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" 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			

# **Voluntary Petition**

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

Name of Debtor(s):

**Imperial Elevator Services, Inc.**

## **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:

### **Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

### **Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X**

Signature of Attorney for Debtor(s)

(Date)

### **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?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ 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.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ 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)

- ☒ 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.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ 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 or 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)

☐ 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, 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
- ☐ Debtor has included in 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.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

## Voluntary Petition

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

Name of Debtor(s):

**Imperial Elevator Services, Inc.**

### Signatures

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

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

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

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

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

**X** \_\_\_\_\_  
Signature of Debtor

**X** \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (If not represented by attorney)

\_\_\_\_\_  
Date

#### Signature of a Foreign Representative

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

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
Signature of Foreign Representative

\_\_\_\_\_  
Printed Name of Foreign Representative

\_\_\_\_\_  
Date

#### Signature of Attorney\*

**X** /s/ Joseph E. Cohen  
Signature of Attorney for Debtor(s)

Joseph E. Cohen 3123243

\_\_\_\_\_  
Printed Name of Attorney for Debtor(s)

Cohen & Krol

\_\_\_\_\_  
Firm Name

105 West Madison Street  
Suite 1100  
Chicago, IL 60602-4600

\_\_\_\_\_  
Address

312-368-0300 Fax: 312-368-4559

\_\_\_\_\_  
Telephone Number

October 13, 2010

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

\_\_\_\_\_  
Address

**X** \_\_\_\_\_  
Date

\_\_\_\_\_  
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.*

#### Signature of Debtor (Corporation/Partnership)

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

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

**X** /s/ James E. Druffel  
Signature of Authorized Individual

James E. Druffel

\_\_\_\_\_  
Printed Name of Authorized Individual

President

\_\_\_\_\_  
Title of Authorized Individual

October 13, 2010

\_\_\_\_\_  
Date

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Imperial Elevator Services, Inc.**

Debtor(s)

Case No.

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) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
American Express Blue P. O. Box 0001 Los Angeles, CA 90096-8000	American Express Blue P. O. Box 0001 Los Angeles, CA 90096-8000			16,856.00
Amtrust c/o McMahan & Sigunick, Ltd. 412 S. Wells St., 6th Flr. Chicago, IL 60607	Amtrust c/o McMahan & Sigunick, Ltd. 412 S. Wells St., 6th Flr. Chicago, IL 60607	Lawsuit		15,188.40
Bryan Cave 161 N. Clark St. Suite 4300 Chicago, IL 60601	Bryan Cave 161 N. Clark St. Suite 4300 Chicago, IL 60601			30,869.00
Canton Elevator 647 Third Street, N.W. Massillon, OH 44647	Canton Elevator 647 Third Street, N.W. Massillon, OH 44647			35,458.00
Cantore c/o Gregory Kulas & Assoc. 30 N. La Salle St., Ste 2140 Chicago, IL 60602	Cantore c/o Gregory Kulas & Assoc. 30 N. La Salle St., Ste 2140 Chicago, IL 60602	Lawsuit		20,000.00
Capital One P.O. Box 85167 Richmond, VA 23285-5167	Capital One P.O. Box 85167 Richmond, VA 23285-5167			25,539.00
Illinois Department of Revenue 100 West Randolph Street Bankruptcy Division Chicago, IL 60601	Illinois Department of Revenue 100 West Randolph Street Bankruptcy Division Chicago, IL 60601			16,888.30
Internal Revenue Service Mail Stop 5010 CHI 230 South Dearborn Street Chicago, IL 60604	Internal Revenue Service Mail Stop 5010 CHI 230 South Dearborn Street Chicago, IL 60604			258,000.00
James Druffel 1414 Althea Drive Mount Prospect, IL 60056	James Druffel 1414 Althea Drive Mount Prospect, IL 60056	Loan		232,712.00
James Druffel 1414 Althea Drive Mount Prospect, IL 60056	James Druffel 1414 Althea Drive Mount Prospect, IL 60056	Back Pay		105,679.00

B4 (Official Form 4) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
<b>James Druffel 1414 Althea Drive Mount Prospect, IL 60056</b>	<b>James Druffel 1414 Althea Drive Mount Prospect, IL 60056</b>	<b>Back Pay not entitled to Priority</b>		<b>93,954.00</b>
<b>James Druffel 1414 Althea Drive Mount Prospect, IL 60056</b>	<b>James Druffel 1414 Althea Drive Mount Prospect, IL 60056</b>	<b>Loan</b>		<b>48,250.00</b>
<b>Libra c/o Pavolich Law, LLC 2952 W. Irving Park Rd., Ste D Chicago, IL 60618</b>	<b>Libra c/o Pavolich Law, LLC 2952 W. Irving Park Rd., Ste D Chicago, IL 60618</b>	<b>Lawsuit</b>		<b>32,085.00</b>
<b>Minnesota Elevator, Inc. c/o Scandaglia &amp; Ryan 55 E. Monroe St., Ste 3440 Chicago, IL 60603</b>	<b>Minnesota Elevator, Inc. c/o Scandaglia &amp; Ryan 55 E. Monroe St., Ste 3440 Chicago, IL 60603</b>	<b>Court File No. 08-CV-4662 RC</b>		<b>443,813.26</b>
<b>NEI Benefit Plans 19 Campus blvd. Suite 200 Newtown Square,, PA</b>	<b>NEI Benefit Plans 19 Campus blvd. Suite 200 Newtown Square,, PA</b>			<b>62,713.32</b>
<b>Peele c/o Teller Levit &amp; Silvertrust, P.C 11 E. Adams St., 8th Floor Chicago, IL 60603</b>	<b>Peele c/o Teller Levit &amp; Silvertrust, P.C 11 E. Adams St., 8th Floor Chicago, IL 60603</b>	<b>Lawsuit</b>		<b>28,951.57</b>
<b>Stephen E. Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Stephen E. Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Back Pay</b>		<b>87,979.00</b>
<b>Stephen E. Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Stephen E. Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Back Pay not entitled to Priority</b>		<b>76,254.00</b>
<b>Stephen Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Stephen Figliulo 11313 Arrowhead Indian Head Park, IL 60525</b>	<b>Loan</b>		<b>20,000.00</b>
<b>XL Specialties Insurance 693 Bloomfield Road Bloomfield, CT 06002</b>	<b>XL Specialties Insurance 693 Bloomfield Road Bloomfield, CT 06002</b>	<b>UPAC Liability &amp; Comp Ins.</b>		<b>19,894.00</b>

B4 (Official Form 4) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Debtor(s)

Case No. \_\_\_\_\_

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

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

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

Date **October 13, 2010**

Signature **/s/ James E. Druffel**

**James E. Druffel**  
**President**

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

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

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

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

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

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

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

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" 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" 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 (See instructions above.)	C O D E B T O R	H U S B A N D	W I F E	J O I N T	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		Husband, Wife, Joint, or Community							
Account No.		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN							
Bank of America Attention: Bankruptcy P.O. Box 15026 Wilmington, DE 19850-5026	-	Secured by all assets							
		Value \$ 450,000.00						380,845.14	0.00
Bank of America Attention: Bankruptcy P.O. Box 15026 Wilmington, DE 19850-5026	-	Secured by all assets							
		Value \$ 450,000.00						45,767.35	0.00
Account No.									
		Value \$							
Account No.									
		Value \$							
Subtotal (Total of this page)								426,612.49	0.00
Total (Report on Summary of Schedules)								426,612.49	0.00

0 continuation sheets attached

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

## 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 "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.

☐ 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 \$11,725\* 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 \$5,775\* 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 \$2,600\* 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).

\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



B6E (Official Form 6E) (4/10) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Wages, salaries, and commissions**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.			<b>Back Pay</b>				<b>105,679.00</b>	
<b>James Druffel</b> <b>1414 Althea Drive</b> <b>Mount Prospect, IL 60056</b>		-						<b>93,954.00</b>
								<b>11,725.00</b>
Account No.			<b>Employee back pay</b>				<b>3,837.00</b>	
<b>Matthew N. McCann</b> <b>404 North Raynor Avenue</b> <b>Joliet, IL 60435</b>		-						<b>0.00</b>
								<b>3,837.00</b>
Account No.			<b>Employee back pay</b>				<b>1,796.00</b>	
<b>Michael Greene</b> <b>6705 West 165th Street</b> <b>Tinley Park, IL 60477</b>		-						<b>0.00</b>
								<b>1,796.00</b>
Account No.			<b>Employee back pay</b>				<b>2,127.00</b>	
<b>Robert Fierke</b> <b>8133 Neuport Drive</b> <b>Willow Springs, IL 60480</b>		-						<b>0.00</b>
								<b>2,127.00</b>
Account No.			<b>Back Pay</b>				<b>87,979.00</b>	
<b>Stephen E. Figliulo</b> <b>11313 Arrowhead</b> <b>Indian Head Park, IL 60525</b>		-						<b>76,254.00</b>
								<b>11,725.00</b>
Subtotal								<b>170,208.00</b>
(Total of this page)							<b>201,418.00</b>	<b>31,210.00</b>

Sheet **1** of **3** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/10) - Cont.

In re Imperial Elevator Services, Inc.,  
Debtor

Case No. \_\_\_\_\_

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Wages, salaries, and commissions**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									AMOUNT ENTITLED TO PRIORITY
Account No.				<b>Employee back pay</b>				<b>4,034.00</b>	
<b>William Plastina 425 Belmont Lane Bartlett, IL 60103</b>		-							<b>0.00</b>
									<b>4,034.00</b>
Account No.									
Account No.									
Account No.									
Account No.									
Subtotal									<b>0.00</b>
(Total of this page)								<b>4,034.00</b>	<b>4,034.00</b>

Sheet 2 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/10) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									AMOUNT ENTITLED TO PRIORITY
Account No. <b>36-4228065</b>									
<b>Illinois Department of Revenue 100 West Randolph Street Bankruptcy Division Chicago, IL 60601</b>		-						<b>16,888.30</b>	<b>0.00</b>
									<b>16,888.30</b>
Account No. <b>36-4228065</b>									
<b>Internal Revenue Service Mail Stop 5010 CHI 230 South Dearborn Street Chicago, IL 60604</b>		-						<b>258,000.00</b>	<b>0.00</b>
									<b>258,000.00</b>
Account No.									
Account No.									
Account No.									
Subtotal									<b>0.00</b>
(Total of this page)								<b>274,888.30</b>	<b>274,888.30</b>
Total									<b>170,208.00</b>
(Report on Summary of Schedules)								<b>480,340.30</b>	<b>310,132.30</b>

Sheet **3** of **3** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

**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.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>AEC Electric Corp.</b> <b>5601 W. Howard Street</b> <b>Niles, IL 60714</b>		-				<b>2,333.05</b>
Account No.						
<b>American Express Blue</b> <b>P. O. Box 0001</b> <b>Los Angeles, CA 90096-8000</b>		-				<b>16,856.00</b>
Account No.						
<b>American Express Gold</b> <b>P. O. Box 0001</b> <b>Los Angeles, CA 90096-8000</b>		-				<b>12,634.00</b>
Account No.						
<b>American Realty Services, Inc.</b> <b>6650 N. Northwest Highway</b> <b>Chicago, IL 60631</b>		-				<b>9,671.00</b>
Subtotal (Total of this page)						<b>41,494.05</b>

10 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>Lawsuit</b>				
<b>Amtrust</b> <b>c/o McMahan &amp; Sigunick, Ltd.</b> <b>412 S. Wells St., 6th Flr.</b> <b>Chicago, IL 60607</b>	-					<b>15,188.40</b>
Account No.						
<b>AT&amp;T</b> <b>P. O. Box 8100</b> <b>Aurora, IL 60507-8100</b>	-					<b>618.38</b>
Account No.						
<b>Bryan Cave</b> <b>161 N. Clark St.</b> <b>Suite 4300</b> <b>Chicago, IL 60601</b>	-					<b>30,869.00</b>
Account No.						
<b>Cameron Electric Motor Corporation</b> <b>551 W. Lexington</b> <b>Chicago, IL 60607</b>	-					<b>Unknown</b>
Account No.						
<b>Canton Elevator</b> <b>647 Third Street, N.W.</b> <b>Massillon, OH 44647</b>	-					<b>35,458.00</b>
Sheet no. <u>1</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>82,133.78</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>Lawsuit</b>				
<b>Cantore c/o Gregory Kulas &amp; Assoc. 30 N. La Salle St., Ste 2140 Chicago, IL 60602</b>	-					<b>20,000.00</b>
Account No.						
<b>Capital One P.O. Box 85167 Richmond, VA 23285-5167</b>	-					<b>25,539.00</b>
Account No.						
<b>Christopher Emerle, CPA 64 Old Orchard Center Suite 339 Skokie, IL 60077</b>	-					<b>2,400.00</b>
Account No.						
<b>City of Chicago Dept. of Revenue P.O. Box 88292 Chicago, IL 60680</b>	-					<b>4,530.00</b>
Account No.						
<b>Columbia Elevator Products Co., Inc 7702 West 5th Avenue Winfield, KS 67156</b>	-					<b>9,234.33</b>
Sheet no. <b>2</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>61,703.33</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.							
<b>ComEd</b> <b>PO Box 6111</b> <b>Carol Stream, IL 60197-6111</b>	-						<b>265.04</b>
Account No.							
<b>Contractors Adjustment Company</b> <b>570 Lake Cook Road</b> <b>Deerfield, IL 60015</b>	-						<b>3,280.00</b>
Account No.							
<b>Davies Supply Company</b> <b>6601 W. grand Avenue</b> <b>Chicago, IL 60707</b>	-						<b>3,013.75</b>
Account No.			<b>Lawsuit</b>				
<b>Ebling</b> <b>c/o Teller Levit &amp; Silvertrust, P.C</b> <b>11 E. Adams St. 8th Floor</b> <b>Chicago, IL 60603</b>	-						<b>11,557.14</b>
Account No.							
<b>Elevator Equipment Corporation</b> <b>4035 Goodwin Avenue</b> <b>Los Angeles, CA 90039-1190</b>	-						<b>599.99</b>
Sheet no. <u>3</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>18,715.92</b>

Debtor

## (Continuation Sheet)

### Best Case Bankruptcy



B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		D I S P U T E D	A M O U N T O F C L A I M
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		
Account No.					
Grainger Dept. 850012923 Palatine, IL 60038	-				1,354.74
Account No.					
Hollister-Whitney Elevator #1 Hollister-Whitney Parkway Quincy, IL 62305	-				11,056.79
Account No.			Lawsuit		
Imperial Electric c/o Teller Levit & Silvertrust, P.C 11 E. Adams St., 8th Floor Chicago, IL 60603	-				7,598.35
Account No.			Loan		
James Druffel 1414 Althea Drive Mount Prospect, IL 60056	-				232,712.00
Account No.			Loan		
James Druffel 1414 Althea Drive Mount Prospect, IL 60056	-				48,250.00
Sheet no. <u>5</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)	300,971.88

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No.			Back Pay not entitled to Priority				93,954.00	
James Druffel 1414 Althea Drive Mount Prospect, IL 60056	-							
Account No.			Lawsuit				7,160.20	
Kone c/o Teller Levit & Silvertrust, P.c 11 E. Adams St., 8th Floor Chicago, IL 60603	-							
Account No.			Lawsuit				32,085.00	
Libra c/o Pavolich Law, LLC 2952 W. Irving Park Rd., Ste D Chicago, IL 60618	-							
Account No.							1,790.85	
Linden Elevator Specialties 3471 E. 450 North P. O. Box 106 Lewisville, ID 83431	-							
Account No.							2,794.30	
Lou-Bob Co. 3650 S. Homan Avenue Chicago, IL 60632	-							
Sheet no. <u>6</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	137,784.35

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							
<b>Magnetek, Inc. Dept. 5367 P. O. Box 3090 Milwaukee, WI 53201-3090</b>	-						<b>2,263.93</b>
Account No.							
<b>McGuire Woods, LLP Attn: Accounts Receivable 901 E. cary Street Richmond, VA 23219-4030</b>	-						<b>13,436.11</b>
Account No.			<b>Court File No. 08-CV-4662 RC</b>				
<b>Minnesota Elevator, Inc. c/o Scandaglia &amp; Ryan 55 E. Monroe St., Ste 3440 Chicago, IL 60603</b>	-						<b>443,813.26</b>
Account No.							
<b>Motion Control Engineering 4183 Paysphere Circle Chicago, IL 60674</b>	-						<b>7,556.83</b>
Account No.							
<b>Mullen Circle brand, Inc. P. O. Box 8487 Northfield, IL 60093-8487</b>	-						<b>538.98</b>
Sheet no. <u>7</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>467,609.11</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C						
Account No.								
NEI Benefit Plans 19 Campus blvd. Suite 200 Newtown Square,, PA		-						62,713.32
Account No.								
Palm Electric 2918 W. Grand Avenue Chicago, IL 60622		-						3,099.00
Account No.				Lawsuit				
Peele c/o Teller Levit & Silvertrust, P.C 11 E. Adams St., 8th Floor Chicago, IL 60603		-						28,951.57
Account No.								
Pitney Bowes P. O. Box 85390 Louisville, KY 40285-5390		-						1,112.58
Account No.								
Pitney Bowes - rental P. O. Box 856390 Louisville, KY 40285-5390		-						271.41
Sheet no. <u>8</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								Subtotal (Total of this page)
								96,147.88

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
Account No.								
QBF Graphics Group 1411 Enterprise Drive Romeoville, IL 60446	-						137.25	
Account No.								
Shell Credit Card P.O. Box 689151 Des Moines, IA 50368-9151	-						10,460.00	
Account No.			Back Pay not entitled to Priority					
Stephen E. Figliulo 11313 Arrowhead Indian Head Park, IL 60525	-						76,254.00	
Account No.			Loan					
Stephen Figliulo 11313 Arrowhead Indian Head Park, IL 60525	-						20,000.00	
Account No.								
Storino Ramello & Durkin 9501 W. Devon Avenue Rosemont, IL 60018	-						4,595.81	
Sheet no. <u>9</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	111,447.06

B6F (Official Form 6F) (12/07) - Cont.

In re **Imperial Elevator Services, Inc.**

Case No. \_\_\_\_\_

Debtor

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
Account No.							
<b>Thompson Elevator Inspection</b> <b>1302 Thayer Street</b> <b>Mount Prospect, IL 60056</b>		-					<b>11,850.00</b>
Account No.							
<b>Viking Printing</b> <b>530 East Gree Street</b> <b>Bensenville, IL 60106</b>		-					<b>714.97</b>
Account No.			<b>UPAC Liability &amp; Comp Ins.</b>				
<b>XL Specialties Insurance</b> <b>693 Bloomfield Road</b> <b>Bloomfield, CT 06002</b>		-					<b>19,894.00</b>
Account No.							
Account No.							
Sheet no. <b>10</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							<b>Subtotal</b> (Total of this page)
							<b>32,458.97</b>
(Report on Summary of Schedules)							<b>Total</b> <b>1,372,607.47</b>

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Imperial Elevator Services, Inc.**

Debtor(s)

Case No.

Chapter

**11**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **24** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **October 13, 2010**

Signature **/s/ James E. Druffel**

**James E. Druffel**  
**President**

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

United States Bankruptcy Court  
Northern District of Illinois

In re Imperial Elevator Services, Inc.

Debtor(s)

Case No.

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u>15,000.00</u>
Prior to the filing of this statement I have received .....	\$	<u>15,000.00</u>
Balance Due .....	\$	<u>0.00</u>

2. \$ 1,039.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods; preparation of Plan; preparation of Form 22C and amendments; relief from stay actions**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: October 13, 2010

/s/ Joseph E. Cohen

**Joseph E. Cohen 3123243**

**Cohen & Krol**

**105 West Madison Street**

**Suite 1100**

**Chicago, IL 60602-4600**

**312-368-0300 Fax: 312-368-4559**



**United States Bankruptcy Court  
Northern District of Illinois**

In re **Imperial Elevator Services, Inc.**

Debtor(s)

Case No.

Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: **62**

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

Date: **October 13, 2010**

**/s/ James E. Druffel**

**James E. Druffel/President**

Signer/Title

AEC Electric Corp.  
5601 W. Howard Street  
Niles, IL 60714

American Express Blue  
P. O. Box 0001  
Los Angeles, CA 90096-8000

American Express Gold  
P. O. Box 0001  
Los Angeles, CA 90096-8000

American Realty Services, Inc.  
6650 N. Northwest Highway  
Chicago, IL 60631

Amtrust  
c/o McMahan & Sigunick, Ltd.  
412 S. Wells St., 6th Flr.  
Chicago, IL 60607

AT&T  
P. O. Box 8100  
Aurora, IL 60507-8100

Bank of America  
Attention: Bankruptcy  
P.O. Box 15026  
Wilmington, DE 19850-5026

Bank of America  
Attention: Bankruptcy  
P.O. Box 15026  
Wilmington, DE 19850-5026

Bryan Cave  
161 N. Clark St.  
Suite 4300  
Chicago, IL 60601

Cameron Electric Motor Corporation  
551 W. Lexington  
Chicago, IL 60607

Canton Elevator  
647 Third Street, N.W.  
Massillon, OH 44647

Cantore  
c/o Gregory Kulas & Assoc.  
30 N. La Salle St., Ste 2140  
Chicago, IL 60602

Capital One  
P.O. Box 85167  
Richmond, VA 23285-5167

Christopher Emerle, CPA  
64 Old Orchard Center  
Suite 339  
Skokie, IL 60077

City of Chicago  
Dept. of Revenue  
P.O. Box 88292  
Chicago, IL 60680

Columbia Elevator Products Co., Inc  
7702 West 5th Avenue  
Winfield, KS 67156

ComEd  
PO Box 6111  
Carol Stream, IL 60197-6111

Contractors Adjustment Company  
570 Lake Cook Road  
Deerfield, IL 60015

Davies Supply Company  
6601 W. grand Avenue  
Chicago, IL 60707

Ebling  
c/o Teller Levit & Silvertrust, P.C  
11 E. Adams St. 8th Floor  
Chicago, IL 60603

Elevator Equipment Corporation  
4035 Goodwin Avenue  
Los Angeles, CA 90039-1190

Enterprise Elevator Products  
1605 Ridgely Street  
Baltimore, MD 21230

Figliulo & Silverman  
10 S. LaSalle St.  
Suite 3600  
Chicago, IL 60603

First Insurance Funding Corp.  
8075 Innovation Way  
Chicago, IL 60682

Fixture Company  
923 N. State Street  
Elgin, IL 60123

General Machining, Inc.  
1474 W. Hubbard Street  
Chicago, IL 60622-6373

Grainger  
Dept. 850012923  
Palatine, IL 60038

Hollister-Whitney Elevator  
#1 Hollister-Whitney Parkway  
Quincy, IL 62305

Illinois Department of Revenue  
100 West Randolph Street  
Bankruptcy Division  
Chicago, IL 60601

Imperial Electric  
c/o Teller Levit & Silvertrust, P.C  
11 E. Adams St., 8th Floor  
Chicago, IL 60603

Internal Revenue Service  
Mail Stop 5010 CHI  
230 South Dearborn Street  
Chicago, IL 60604

James Druffel  
1414 Althea Drive  
Mount Prospect, IL 60056

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Mount Prospect, IL 60056

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Mount Prospect, IL 60056

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1414 Althea Drive  
Mount Prospect, IL 60056

Kone  
c/o Teller Levit & Silvertrust, P.c  
11 E. Adams St., 8th Floor  
Chicago, IL 60603

Libra  
c/o Pavolich Law, LLC  
2952 W. Irving Park Rd., Ste D  
Chicago, IL 60618

Linden Elevator Specialties  
3471 E. 450 North  
P. O. Box 106  
Lewisville, ID 83431

Lou-Bob Co.  
3650 S. Homan Avenue  
Chicago, IL 60632

Magnetek, Inc.  
Dept. 5367  
P. O. Box 3090  
Milwaukee, WI 53201-3090

Matthew N. McCann  
404 North Raynor Avenue  
Joliet, IL 60435

McGuire Woods, LLP  
Attn: Accounts Receivable  
901 E. Cary Street  
Richmond, VA 23219-4030

Michael Greene  
6705 West 165th Street  
Tinley Park, IL 60477

Minnesota Elevator, Inc.  
c/o Scandaglia & Ryan  
55 E. Monroe St., Ste 3440  
Chicago, IL 60603

Motion Control Engineering  
4183 Paysphere Circle  
Chicago, IL 60674

Mullen Circle brand, Inc.  
P. O. Box 8487  
Northfield, IL 60093-8487

NEI Benefit Plans  
19 Campus blvd.  
Suite 200  
Newtown Square,, PA

Palm Electric  
2918 W. Grand Avenue  
Chicago, IL 60622

Peele  
c/o Teller Levit & Silvertrust, P.C  
11 E. Adams St., 8th Floor  
Chicago, IL 60603

Pitney Bowes  
P. O. Box 85390  
Louisville, KY 40285-5390

Pitney Bowes - rental  
P. O. Box 856390  
Louisville, KY 40285-5390

QBF Graphics Group  
1411 Enterprise Drive  
Romeoville, IL 60446

Robert Fierke  
8133 Newport Drive  
Willow Springs, IL 60480

Shell Credit Card  
P.O. Box 689151  
Des Moines, IA 50368-9151

Stephen E. Figliulo  
11313 Arrowhead  
Indian Head Park, IL 60525

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Indian Head Park, IL 60525

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11313 Arrowhead  
Indian Head Park, IL 60525

Storino Ramello & Durkin  
9501 W. Devon Avenue  
Rosemont, IL 60018

Thompson Elevator Inspection  
1302 Thayer Street  
Mount Prospect, IL 60056

Viking Printing  
530 East Gree Street  
Bensenville, IL 60106

William Plastina  
425 Belmont Lane  
Bartlett, IL 60103

XL Specialties Insurance  
693 Bloomfield Road  
Bloomfield, CT 06002