

UNITED STATES BANKRUPTCY COURT DISTRICT OF KANSAS KANSAS CITY DIVISION				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): <b>House of Hope, 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)/Complete EIN (if more than one, state all): <b>90-0152709</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):		
Street Address of Debtor (No. and Street, City, and State): <b>2400 S. Greenwich Rd. Wichita, KS</b>			Street Address of Joint Debtor (No. and Street, City, and State):		
ZIP CODE <b>67210</b>			ZIP CODE		
County of Residence or of the Principal Place of Business: <b>Sedgwick</b>			County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address): <b>2400 S. Greenwich Rd. Wichita, KS</b>			Mailing Address of Joint Debtor (if different from street address):		
ZIP CODE <b>67210</b>			ZIP CODE		
Location of Principal Assets of Business Debtor (if different from street address above):					
ZIP CODE					
<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 checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <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>Check one box: Chapter 11 Debtors</b> <input checked="" type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input checked="" 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).  <b>Check all applicable boxes:</b> <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
Estimated Number of Creditors <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					
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion					

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <b>House of Hope, Inc.</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <b>None</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor: <b>None</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p style="font-size: 2em; margin-top: 20px;"><b>X</b> _____</p> <p style="text-align: right; margin-top: 10px;">Date</p>	
<p style="text-align: center;"><b>Exhibit C</b></p> <p>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?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>			
<p style="text-align: center;"><b>Exhibit D</b></p> <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p>			
<p style="text-align: center;"><b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action 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.</p>			
<p style="text-align: center;"><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <div style="margin-left: 400px; margin-top: 10px;">       _____        (Name of landlord that obtained judgment)     </div> <div style="margin-left: 400px; margin-top: 30px;">       _____        (Address of landlord)     </div> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>			

**Voluntary Petition***(This page must be completed and filed in every case)*Name of Debtor(s): **House of Hope, 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** \_\_\_\_\_**X** \_\_\_\_\_\_\_\_\_\_  
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/ David P. Eron  
**David P. Eron** Bar No. **23429**

**Eron Law Office, P.A.**  
**229 E. William, Suite 100**  
**Wichita, KS 67202**

Phone No. **(316) 262-5500** Fax No. **(316) 262-5559**\_\_\_\_\_  
11/17/2010\_\_\_\_\_  
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 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.

**House of Hope, Inc.**

**X** /s/ Alma C. Johnson  
Signature of Authorized Individual

**Alma C. Johnson**\_\_\_\_\_  
Printed Name of Authorized Individual**President**\_\_\_\_\_  
Title of Authorized Individual\_\_\_\_\_  
11/17/2010\_\_\_\_\_  
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 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.*

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

CASE NO

CHAPTER 11

**EXHIBIT "A" TO VOLUNTARY PETITION**

1. Debtor's employer identification number is <b>90-0152709</b> .		
2. If any of debtor's securities are registered under section 12 of the Securities and Exchange Act of 1934, the SEC file number is _____.		
3. The following financial data is the latest available information and refers to the debtor's condition on <b>11/17/2010</b> .		
a. Total Assets	<b>\$109,665.01</b>	
b. Total Liabilities	<b>\$316,715.24</b>	
<b>Secured debt</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Fixed, liquidated secured debt	<b>\$229,703.55</b>	<b>5</b>
Contingent secured debt	<b>\$0.00</b>	<b>0</b>
Disputed secured debt	<b>\$0.00</b>	<b>0</b>
Unliquidated secured debt	<b>\$0.00</b>	<b>0</b>
<b>Unsecured debt</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Fixed, liquidated unsecured debt	<b>\$87,011.69</b>	<b>50</b>
Contingent unsecured debt	<b>\$0.00</b>	<b>0</b>
Disputed unsecured debt	<b>\$0.00</b>	<b>1</b>
Unliquidated unsecured debt	<b>\$0.00</b>	<b>1</b>
<b>Stock</b>	<b>Amounts</b>	<b>Approximate number of holders</b>
Number of shares of preferred stock		
Number of shares of common stock	<b>500</b>	<b>1</b>
<b>Comments, if any</b>		
4. Brief description of debtor's business: <i>Debtor operates homes in Wichita, Kansas for the care and support of individuals with developmental disabilities.</i>		

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION

IN RE: **House of Hope, Inc.**

CASE NO

CHAPTER **11**

**EXHIBIT "A" TO VOLUNTARY PETITION**

*Continuation Sheet No. 1*

5. List the name of any person who directly or indirectly owns, controls, or holds, with power to vote, 20% or more of the voting securities of the debtor:

*Alma C. Johnson*

6. List the name of all corporations 20% or more of the outstanding voting securities of which are directly or indirectly owned, controlled, or held, with power to vote, by debtor:

I, **Alma C. Johnson**, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing Exhibit "A" to Voluntary Petition, and that it is true and correct to the best of my information and belief.

Date: **11/17/2010**

Signature: **/s/ Alma C. Johnson**  
**Alma C. Johnson**  
**President**

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property		Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
None				
			<b>Total: \$0.00</b>	

(Report also on Summary of Schedules)

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Petty Cash	\$50.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Bank of America Checking ...4042 (in the red)	\$0.00
		Bank of America checking ...3836	\$2,500.00
		Bank of America Checking ...6644 (in the red)	\$0.00
		Community Bank Checking ...5202 (in the red)	\$0.00
		Prepaid grocery cards	\$300.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X		
4. Household goods and furnishings, including audio, video and computer equipment.	X		
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6. Wearing apparel.	X		
7. Furs and jewelry.	X		
8. Firearms and sports, photographic, and other hobby equipment.	X		
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 1*

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	<b>X</b>		
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>		
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>		
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>		
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>		
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<b>X</b>		
16. Accounts receivable.		Individual Payors	\$10,442.05
		Medicaid	\$22,515.24
		Sedgwick County	\$3,441.00
		Misc. collections judgments	\$4,666.72



In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>		
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>		
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>		
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>		
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>		
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>		
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>		

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 3*

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>		
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1994 Ford Escort 125K	\$1,600.00
		2000 Chevy Venture 153K	\$2,180.00
		1999 Chevy Venture 121K	\$2,450.00
		2001 Chevy Van 161K	\$2,875.00
		2001 Olds Silhouette 174K	\$3,300.00
		1999 Dodge Caravan 181K	\$1,635.00
		1990 Chevy Suburban 149K	\$4,265.00
		2000 Ford Taurus 141K	\$2,210.00
		1997 Ford Taurus 92K	\$2,375.00
		2001 Dodge Maxiwagon 57K	\$5,335.00
		2002 Ford Taurus 162K	\$2,440.00
		1998 Toyota Camry 160K	\$2,495.00
		1999 Infiniti I30 108K	\$3,945.00
		1999 Olds Silhouette 140K	\$4,560.00

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 4*

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		1997 Chevy Van 143K	\$1,875.00
		2000 Oldsmobile Silhouette 74K	\$4,560.00
26. Boats, motors, and accessories.	X		
27. Aircraft and accessories.	X		
28. Office equipment, furnishings, and supplies.		4 Laptops, 6 Desktop computers	\$1,000.00
		6 printers, fax machine, small copier	\$500.00
		Office furniture, including sofa, loveseat, picnic tables, conference table, office decor	\$3,300.00
		Filing cabinets	\$1,500.00
		Konica Minolta Copier	\$3,500.00
		Nurse's station furniture, including coffee Maker, small refrigerator, Medical Quality Scale	\$300.00
		2 flat screen televisions	\$500.00
		Furnishings for houses, including furniture, linens, dishware, appliances, misc. tools, electronics etc. (but not including bedroom furniture, which is owned by clients)	\$6,200.00
29. Machinery, fixtures, equipment, and supplies used in business.		Exercise equipment	\$200.00
30. Inventory.		Office supplies, cleaning supplies, first aid supplies, hygiene supplies, groceries	\$650.00
31. Animals.	X		

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 5

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
32. Crops - growing or harvested. Give particulars.	X		
33. Farming equipment and implements.	X		
34. Farm supplies, chemicals, and feed.	X		
35. Other personal property of any kind not already listed. Itemize.	X		
<div> <div>5</div> <div>continuation sheets attached</div> </div> <div> <div>Total &gt;</div> <div>\$109,665.01</div> </div>			

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

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

☐ Check if debtor claims a homestead exemption that exceeds  
 \$146,450.\*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Not Applicable			
* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.		\$0.00	\$0.00

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ 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 AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
<b>ACCT #: xx-xxx2709</b> <b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia PA 19114</b>		DATE INCURRED: NATURE OF LIEN: <b>Taxes</b> COLLATERAL: <b>All Assets</b> REMARKS: <b>unpaid 941 deposits, 3rd quarter 2009</b>				<b>\$15,234.57</b>	
		VALUE: <b>\$109,665.01</b>					
<b>Representing:</b> <b>Internal Revenue Service</b>		<b>US Attorney Kansas City</b> <b>Robert J Dole US Courthouse Ste 360</b> <b>500 State Avenue</b> <b>Kansas City KS 66101</b>				<b>Notice Only</b>	<b>Notice Only</b>
<b>ACCT #:</b> <b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia PA 19114</b>		DATE INCURRED: NATURE OF LIEN: <b>Taxes</b> COLLATERAL: <b>All assets</b> REMARKS: <b>unpaid 941 taxes, 4th quarter 2009</b>				<b>\$82,841.55</b>	
		VALUE: <b>\$109,665.01</b>					
<b>Representing:</b> <b>Internal Revenue Service</b>		<b>US Attorney Kansas City</b> <b>Robert J Dole US Courthouse Ste 360</b> <b>500 State Avenue</b> <b>Kansas City KS 66101</b>				<b>Notice Only</b>	<b>Notice Only</b>
<b>Subtotal (Total of this Page) &gt;</b>						<b>\$98,076.12</b>	<b>\$0.00</b>
<b>Total (Use only on last page) &gt;</b>							

2 continuation sheets attached

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

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)		CODEBTR	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #:	<b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia PA 19114</b>		DATE INCURRED: NATURE OF LIEN: <b>Taxes</b> COLLATERAL: <b>All Assets</b> REMARKS: <b>Unpaid 941 deposits, 1st Quarter 2010</b>				<b>\$40,622.66</b>	<b>\$29,033.77</b>
			VALUE: <b>\$86,265.01</b>					
<b>Representing:</b> <b>Internal Revenue Service</b>			<b>US Attorney Kansas City</b> <b>Robert J Dole US Courthouse Ste 360</b> <b>500 State Avenue</b> <b>Kansas City KS 66101</b>				<b>Notice Only</b>	<b>Notice Only</b>
ACCT #:	<b>Internal Revenue Service</b> <b>PO Box 21126</b> <b>Philadelphia PA 19114</b>		DATE INCURRED: NATURE OF LIEN: <b>Taxes</b> COLLATERAL: <b>All assets</b> REMARKS: <b>unpaid 941 deposits, 2nd quarter 2010</b>				<b>\$37,393.00</b>	<b>\$37,393.00</b>
			VALUE: <b>\$0.00</b>					
<b>Representing:</b> <b>Internal Revenue Service</b>			<b>US Attorney Kansas City</b> <b>Robert J Dole US Courthouse Ste 360</b> <b>500 State Avenue</b> <b>Kansas City KS 66101</b>				<b>Notice Only</b>	<b>Notice Only</b>
Sheet no. <u>1</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims				<b>Subtotal (Total of this Page) &gt;</b> <b>Total (Use only on last page) &gt;</b>			<b>\$78,015.66</b>	<b>\$66,426.77</b>

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

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #:  <b>Internal Revenue Service PO Box 21126 Philadelphia PA 19114</b>		DATE INCURRED: NATURE OF LIEN: <b>Taxes</b> COLLATERAL:  REMARKS: <b>Unpaid 941 deposits for 3rd quarter 2010</b>  VALUE: <b>\$0.00</b>				<b>\$53,611.77</b>	<b>\$53,611.77</b>
<b>Representing: Internal Revenue Service</b>		<b>US Attorney Kansas City Robert J Dole US Courthouse Ste 360 500 State Avenue Kansas City KS 66101</b>				<b>Notice Only</b>	<b>Notice Only</b>
Sheet no. <b>2</b> of <b>2</b> continuation sheets attached to Schedule of Creditors Holding Secured Claims <b>Subtotal (Total of this Page) &gt;</b> <b>Total (Use only on last page) &gt;</b>						<b>\$53,611.77</b> <b>\$229,703.55</b>	<b>\$53,611.77</b> <b>\$120,038.54</b>

(Report also on Summary of Schedules.)

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



**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

☐ 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).

☐ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

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

\_\_\_\_\_ **1** \_\_\_\_\_ continuation sheets attached

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units
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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>July 2010 Withholdings</b>		\$3,268.74	\$2,842.38	\$426.36
ACCT #: Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>August 2010 Withholdings</b>		\$3,996.63	\$3,475.33	\$521.30
ACCT #: Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>September 2010 Withholdings</b>		\$3,012.00	\$3,012.00	\$0.00
ACCT #: Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>October 2010 Withholdings</b>		\$2,812.35	\$2,812.35	\$0.00
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims				<b>Subtotals (Totals of this page) &gt;</b>	\$13,089.72	\$12,142.06
<b>Total &gt;</b> (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)					\$13,089.72	
<b>Totals &gt;</b> (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)					\$12,142.06	\$947.66

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ 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	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>Alma Johnson</b> <b>13502 E Mustang Cir</b> <b>Wichita KS 67230</b>		DATE INCURRED: CONSIDERATION: <b>Loan</b> REMARKS:				<b>\$670.51</b>
ACCT #: <b>Amaryllis Investments, LLC</b> <b>2345 Blevin Rd</b> <b>Yuba City, CA 95993</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 8503 Parkmont, Wichita, KS</b>				<b>\$1,050.00</b>
ACCT #: xxx xxx xxxx 432 4 <b>AT&amp;T Services Inc</b> <b>One AT&amp;T Way Room 3A218</b> <b>Bedminster NJ 07921</b>		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for Parkmont</b>				<b>\$84.89</b>
ACCT #: xxxx xxxx xxxx 1887 <b>Bank of America</b> <b>Attn: Bankruptcy Dept</b> <b>100 N Tryton</b> <b>Charlotte NC 28255-0001</b>		DATE INCURRED: CONSIDERATION: <b>Credit Card</b> REMARKS:				<b>\$13,381.69</b>
ACCT #: <b>Bank of America</b> <b>PO Box 25118</b> <b>Tampa FL 33622-5118</b>		DATE INCURRED: CONSIDERATION: <b>Uncleared Checks</b> REMARKS:				<b>\$924.00</b>
ACCT #: <b>Community Bank</b> <b>11330 E 21st Street</b> <b>Wichita KS 67206</b>		DATE INCURRED: CONSIDERATION: <b>Uncleared Checks</b> REMARKS:				<b>\$2,200.00</b>
<b>Subtotal &gt;</b>						<b>\$18,311.09</b>
<b>Total &gt;</b>						

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

7 continuation sheets attached

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCT #: xxx xxxx xxxxx4910 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 8502 E Parkmont Dr, Wichita, KS 67207</b>				<b>\$158.43</b>	
ACCT #: xxx xxxx xxxxx7403 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 2034 S Flynn St, Wichita, KS 67207</b>				<b>\$214.89</b>	
ACCT #: xxx xxxx xxxxx5005 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>For Service at 8503 E Parkmont Dr, Wichita, KS 67207</b>				<b>\$158.43</b>	
ACCT #: xxx xxxxx xxxxx3605 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: <b>184.66</b> CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 8439 E Parkmont Ct, Wichita, KS 67207</b>				<b>\$0.00</b>	
ACCT #: xxx xxxx xxxxx3607 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 2216 S Ridgweood Dr, Wichita, KS 67218</b>				<b>\$322.46</b>	
ACCT #: xxx xxxx xxxxx3605 Cox Communications Residential Attn Bankruptcy 1400 Lake Hearn Drive Atlanta GA 30319		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service at 8439 E Parkmont Ct, Wichita, KS 67207</b>				<b>\$164.06</b>	
Sheet no. <u>1</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal &gt;</b>	<b>\$1,018.27</b>
						<b>Total &gt;</b>	
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxx xxxx xxxxx0204</b> <b>Cox Communications Residential</b> <b>Attn Bankruptcy</b> <b>1400 Lake Hearn Drive</b> <b>Atlanta GA 30319</b>		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 8968 E Funston Ct, Wichita, KS</b> <b>67207</b>				<b>\$164.06</b>
ACCT #: <b>Deans Auto Service</b> <b>2885 S Hillside Street</b> <b>Wichita KS 67216-2546</b>		DATE INCURRED: CONSIDERATION: <b>Auto Service</b> REMARKS:				<b>\$1,974.81</b>
ACCT #: <b>Gary and Alma Johnson</b> <b>13502 E Mustang Circle</b> <b>Wichita, KS 67230</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 2034 Flynn</b>				<b>\$900.00</b>
ACCT #: <b>Gary and Alma Johnson</b> <b>13502 E Mustang Circle</b> <b>Wichita, KS 67230</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 2053 Lori Lane, Wichita, KS</b>				<b>\$1,300.00</b>
ACCT #: <b>Gary and Alma Johnson</b> <b>13502 E Mustang Circle</b> <b>Wichita, KS 67230</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 1026 S Waverly</b>				<b>\$831.92</b>
ACCT #: <b>Green Pawn, LLC</b> <b>PO Box 780001</b> <b>Wichita, KS 67278-0001</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for Main Office, 2400 S Greenwich</b> <b>Road, Wichita, KS</b>				<b>\$1,550.00</b>
Sheet no. <u>2</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal &gt;</b>
						<b>\$6,720.79</b>
						<b>Total &gt;</b>
						(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>Interim Health Care</b> <b>333 S Broadway No 200</b> <b>Wichita KS 67202</b>		DATE INCURRED: CONSIDERATION: <b>Temp Labor</b> REMARKS:				<b>\$5,117.41</b>
<b>Representing:</b> <b>Interim Health Care</b>		<b>Kansas Counselors Inc</b> <b>1421 N Saint Paul Street</b> <b>Wichita KS 67203-1718</b>				<b>Notice Only</b>
ACCT #: <b>Jerry Nicholas</b> <b>8324 Oxford Circle</b> <b>Wichita, KS 67226</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 9020 Bluestem</b> <b>Wichita, KS 67207</b>				<b>\$1,025.00</b>
ACCT #: <b>Kansas Department of Labor</b> <b>Attn Legal Services</b> <b>401 SW Topeka</b> <b>Topeka KS 66603-3182</b>		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>Unemployment tax, 1st Quarter 2010</b>				<b>\$11,847.82</b>
ACCT #: <b>Kansas Department of Labor</b> <b>Attn Legal Services</b> <b>401 SW Topeka</b> <b>Topeka KS 66603-3182</b>		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS: <b>Unemployment tax, 2nd quarter 2010</b>				<b>\$10,044.01</b>
ACCT #: <b>Kansas Department of Labor</b> <b>Attn Legal Services</b> <b>401 SW Topeka</b> <b>Topeka KS 66603-3182</b>		DATE INCURRED: CONSIDERATION: <b>Taxes</b> REMARKS:				<b>\$8,156.70</b>
Sheet no. <b>3</b> of <b>7</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal &gt; \$36,190.94</b>
<div style="text-align: right;"> <b>Total &gt;</b>  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable, on the  Statistical Summary of Certain Liabilities and Related Data.) </div>						

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxx xxxxx20 64 Kansas Gas Service Attn Bankruptcy Team PO Box 3535 Topeka KS 66601-3535		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna #3</b>				\$66.92
ACCT #: xxxxxxxx xxxxx21 82 Kansas Gas Service Attn Bankruptcy Team PO Box 3535 Topeka KS 66601-3535		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #2</b>				\$62.64
ACCT #: xxxxxxxx xxxxx22 00 Kansas Gas Service Attn Bankruptcy Team PO Box 3535 Topeka KS 66601-3535		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #4</b>				\$67.99
ACCT #: xxxxxxxx xxxxx19 36 Kansas Gas Service Attn Bankruptcy Team PO Box 3535 Topeka KS 66601-3535		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #1</b>				\$67.84
ACCT #: xxxxxxxx xxxxx14 36 Kansas Gas Service Attn Bankruptcy Team PO Box 3535 Topeka KS 66601-3535		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1231 Longfellow</b>				\$86.34
ACCT #: TMD Enterprises, LLC 211 S Tyler Wichita, KS 67209		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 1225-1231 S Longfellow, Wichita, KS</b>				\$4,000.00
Sheet no. <u>4</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$4,351.73
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total >

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>TMD Enterprises, LLC</b> <b>211 S Tyler</b> <b>Wichita, KS 67209</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 1514 E Fortuna, Apartments 1,2, 3, 4</b>				<b>\$1,900.00</b>
ACCT #: <b>W&amp;H Enerterprises, LLC</b> <b>Attn: Darrin Wildeman and Bret Heinz</b> <b>9229 E Lincoln Ct.</b> <b>Wichita, KS 67207</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 8502 Parkmont</b> <b>Wichita, KS</b>				<b>\$950.00</b>
ACCT #: <b>W&amp;H Enterprises, LLC</b> <b>Attn: Darrin Wildeman or Bret Heinz</b> <b>9229 E Lincoln Ct.</b> <b>Wichita, KS 67207</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 2350 Lori Lane, Wichita, KS 67207</b>				<b>\$975.00</b>
ACCT #: <b>W&amp;H Enterprises, LLC</b> <b>9229 E Lincoln Ct</b> <b>Wichita, KS 67207</b>		DATE INCURRED: CONSIDERATION: <b>Contract/Lease</b> REMARKS: <b>Lease for 8439 Parkmont Ct, Wichita, KS</b>				<b>\$1,050.00</b>
ACCT #: <b>Wall and Associates</b> <b>PO Box 605</b> <b>Haymarket VA 20168</b>		DATE INCURRED: CONSIDERATION: <b>Professional Goods and Services</b> REMARKS:		X	X	<b>Unknown</b>
ACCT #: xxxxxx1963 <b>Westar Energy</b> <b>PO Box 208</b> <b>Wichita KS 67201</b>		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>For Sercice at 9100 E Harry 2611, Wichita, KS</b> <b>67207</b>				<b>\$655.93</b>
Sheet no. <u>5</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal &gt;</b> <b>\$5,530.93</b>
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						<b>Total &gt;</b>



**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx4020 Westar Energy PO Box 208 Wichita KS 67201		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>For Service at 8439 Parkmont Ct, Wichita, KS 67207</b>				\$520.66
ACCT #: xxxxxx7883 Westar Energy PO Box 208 Wichita KS 67201		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1026 Waverly St, Wichita, KS 67218</b>				\$531.04
ACCT #: xxxxxx-xx9999 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #4</b>				\$43.97
ACCT #: xxxxxx-xx9998 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #3</b>				\$43.97
ACCT #: xxxxxx-xx9997 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #2</b>				\$41.24
ACCT #: xxxxxx-xx9996 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1514 E Fortuna, #1</b>				\$49.44

Sheet no. 6 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > **\$1,230.32**

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

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxx-xxx15-00 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 951 N Westview</b>				\$41.80
ACCT #: xxxxxx-x6503 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1026 Waverly St</b>				\$111.95
ACCT #: xxxxxx-x0048 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 2216 S Ridgewood</b>				\$92.21
ACCT #: xxxxxx-x9457 Wichita Water Utilities City Hall 8th Floor 455 N Main Wichita KS 67202		DATE INCURRED: CONSIDERATION: <b>Utilities</b> REMARKS: <b>Service for 1615 S Parkwood Ln</b>				\$321.94
Sheet no. <u>7</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$567.90
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total > \$73,921.97

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

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

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

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<b>Amaryllis Investments, LLC</b> 2345 Blevin Rd Yuba City, CA 95993	Lease for 8503 Parkmont, Wichita, KS Contract to be ASSUMED
<b>Claremont Apartments</b> 9100 E Harry Wichita, KS 67207	Contract for Apartment (Lease in the name of Alma Johnson) Contract to be ASSUMED
<b>Erik C. Baker</b> 6003 SW 23rd Terrace Topeka KS 66614	Lease for 8968 E Funston Court, Wichita, KS 67207 Contract to be REJECTED
<b>Erik C. Baker</b> 6003 SW 23rd Terrace Topeka KS 66614	Lease for 8966 Funston, Wichita, KS Contract to be REJECTED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	Lease for 2034 Flynn Contract to be ASSUMED

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES***Continuation Sheet No. 1*

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	Lease for 2053 Lori Lane, Wichita, KS Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	Lease for 1026 S Waverly Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	1999 Ford Windstar Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	1994 Ford Econoline Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	1986 Ford F150 Pickup Contract to be ASSUMED

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES***Continuation Sheet No. 2*

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	2001 Diam Bus Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	1996 Ford Van Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	2004 Chevy Van Contract to be ASSUMED
<b>Gary and Alma Johnson</b> 13502 E Mustang Circle Wichita, KS 67230	1995 Ford Contract to be ASSUMED
<b>Green Pawn, LLC</b> PO Box 780001 Wichita, KS 67278-0001	Lease for Main Office, 2400 S Greenwich Road, Wichita, KS Contract to be ASSUMED

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES***Continuation Sheet No. 3*

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<b>Jerry Nicholas</b> 8324 Oxford Circle Wichita, KS 67226	Lease for 9020 Bluestem Wichita, KS 67207  Contract to be ASSUMED
<b>John Pharm</b> 2216 Ridgewood Wichita KS 67218	Lease for 2216 Ridgewood Contract to be ASSUMED
<b>Ronald Cazal, Sr.</b> 527 E Harry Wichita, KS 67211	Lease for 2265 S Greekwich Rd, Wichita, KS Contract to be REJECTED
<b>Sedgwick County</b> 525 N Main Number 320 Wichita KS 67203	Community Service Provider contract for services Contract to be ASSUMED
<b>TMD Enterprises, LLC</b> 211 S Tyler Wichita, KS 67209	Lease for 1225-1231 S Longfellow, Wichita, KS Contract to be ASSUMED

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES***Continuation Sheet No. 4*

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<p><b>TMD Enterprises, LLC</b> 211 S Tyler Wichita, KS 67209</p> <p><b>W&amp;H Enerterprises, LLC</b> Attn: Darrin Wildeman and Bret Heinz 9229 E Lincoln Ct. Wichita, KS 67207</p> <p><b>W&amp;H Enterprises, LLC</b> Attn: Darrin Wildeman or Bret Heinz 9229 E Lincoln Ct. Wichita, KS 67207</p> <p><b>W&amp;H Enterprises, LLC</b> 9229 E Lincoln Ct Wichita, KS 67207</p>	<p>Lease for 1514 E Fortuna, Apartments 1,2, 3, 4 Contract to be ASSUMED</p> <p>Lease for 8502 Parkmont Wichita, KS Contract to be ASSUMED</p> <p>Lease for 2350 Lori Lane, Wichita, KS 67207 Contract to be ASSUMED</p> <p>Lease for 8439 Parkmont Ct, Wichita, KS Contract to be ASSUMED</p>

In re **House of Hope, Inc.**Case No. \_\_\_\_\_  
(if known)**SCHEDULE H - CODEBTORS**

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

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR



**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

In re **House of Hope, Inc.**

Case No.

Chapter **11**

**SUMMARY OF SCHEDULES**

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

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$0.00			
B - Personal Property	Yes	6	\$109,665.01			
C - Property Claimed as Exempt	No					
D - Creditors Holding Secured Claims	Yes	3			\$229,703.55	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2			\$13,089.72	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8			\$73,921.97	
G - Executory Contracts and Unexpired Leases	Yes	5				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	No					N/A
J - Current Expenditures of Individual Debtor(s)	No					N/A
TOTAL		26	\$109,665.01	\$316,715.24		

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

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### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A 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  
28 sheets, and that they are true and correct to the best of my knowledge, information, and belief.  
(Total shown on summary page plus 1.)

Date 11/17/2010

Signature /s/ Alma C. Johnson  
Alma C. Johnson  
President

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

CASE NO

CHAPTER 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) 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>\$5,389.00</u>
Prior to the filing of this statement I have received:	<u>\$5,389.00</u>
Balance Due:	<u>\$0.00</u>

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

☒ Debtor ☐ Other (specify)

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

☒ Debtor ☐ Other (specify)

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

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

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

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

**Fees are billed at the applicable hourly rate, subject to retainer agreement and approval of employment application. Received fees consists of the entire cost and fee retainer. Agreed fees indicates the portion of the retainer used pre-petition, including filing fee. Balance due constitutes retainer remaining on the petition date.**

**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.

11/17/2010

Date

/s/ David P. Eron

David P. Eron

Eron Law Office, P.A.

229 E. William, Suite 100

Wichita, KS 67202

Phone: (316) 262-5500 / Fax: (316) 262-5559

Bar No. 23429

/s/ Alma C. Johnson

Alma C. Johnson  
President

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

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)	(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]
Internal Revenue Service PO Box 21126 Philadelphia PA 19114		Taxes		<b>\$53,611.77</b> <b>Value: \$0.00</b>
Internal Revenue Service PO Box 21126 Philadelphia PA 19114		Taxes		<b>\$37,393.00</b> <b>Value: \$0.00</b>
Internal Revenue Service PO Box 21126 Philadelphia PA 19114		Taxes		<b>\$40,622.66</b> <b>Value: \$11,588.89</b>
Bank of America Attn: Bankruptcy Dept 100 N Tryon Charlotte NC 28255-0001		Credit Card		<b>\$13,381.69</b>
Kansas Department of Labor Attn Legal Services 401 SW Topeka Topeka KS 66603-3182		Taxes		<b>\$11,847.82</b>
Kansas Department of Labor Attn Legal Services 401 SW Topeka Topeka KS 66603-3182		Taxes		<b>\$10,044.01</b>

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

Case No.

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS***Continuation Sheet No. 1*

(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]
Kansas Department of Labor Attn Legal Services 401 SW Topeka Topeka KS 66603-3182		Taxes		<b>\$8,156.70</b>
Interim Health Care 333 S Broadway No 200 Wichita KS 67202		Temp Labor		<b>\$5,117.41</b>
TMD Enterprises, LLC 211 S Tyler Wichita, KS 67209		Contract/Lease		<b>\$4,000.00</b>
Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		Taxes		<b>\$3,996.63</b>
Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		Taxes		<b>\$3,268.74</b>
Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		Taxes		<b>\$3,012.00</b>
Kansas Dept of Revenue Civil Tax Enforcement PO Box 12005 915 SW Harrison Topeka KS 66612-2005		Taxes		<b>\$2,812.35</b>

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

Case No.

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS***Continuation Sheet No. 2*

(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]
Community Bank 11330 E 21st Street Wichita KS 67206		Uncleared Checks		<b>\$2,200.00</b>
Deans Auto Service 2885 S Hillside Street Wichita KS 67216-2546		Auto Service		<b>\$1,974.81</b>
TMD Enterprises, LLC 211 S Tyler Wichita, KS 67209		Contract/Lease		<b>\$1,900.00</b>
Green Pawn, LLC PO Box 780001 Wichita, KS 67278-0001		Contract/Lease		<b>\$1,550.00</b>
Gary and Alma Johnson 13502 E Mustang Circle Wichita, KS 67230		Contract/Lease		<b>\$1,300.00</b>
W&H Enterprises, LLC 9229 E Lincoln Ct Wichita, KS 67207		Contract/Lease		<b>\$1,050.00</b>
Amaryllis Investments, LLC 2345 Blevin Rd Yuba City, CA 95993		Contract/Lease		<b>\$1,050.00</b>

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

IN RE: **House of Hope, Inc.**

Case No.

Chapter **11**

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

*Continuation Sheet No. 3*

**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: 11/17/2010

Signature: /s/ Alma C. Johnson  
**Alma C. Johnson**  
**President**

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION

IN RE: **House of Hope, Inc.**

CASE NO

CHAPTER 11

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 11/17/2010

Signature /s/ Alma C. Johnson  
*Alma C. Johnson*  
*President*

Date \_\_\_\_\_

Signature \_\_\_\_\_



Alma Johnson  
13502 E Mustang Cir  
Wichita KS 67230

Gary and Alma Johnson  
13502 E Mustang Circle  
Wichita, KS 67230

Ronald Cazel, Sr.  
527 E Harry  
Wichita, KS 67211

Amaryllis Investments, LLC  
2345 Blevin Rd  
Yuba City, CA 95993

Green Pawn, LLC  
PO Box 780001  
Wichita, KS 67278-0001

Sedgwick County  
525 N Main Number 320  
Wichita KS 67203

AT&T Services Inc  
One AT&T Way Room 3A218  
Bedminster NJ 07921

Interim Health Care  
333 S Broadway No 200  
Wichita KS 67202

TMD Enterprises, LLC  
211 S Tyler  
Wichita, KS 67209

Bank of America  
Attn: Bankruptcy Dept  
100 N Tryton  
Charlotte NC 28255-0001

Internal Revenue Service  
PO Box 21126  
Philadelphia PA 19114

US Attorney Kansas City  
Robert J Dole US Courthouse Ste  
500 State Avenue  
Kansas City KS 66101

Bank of America  
PO Box 25118  
Tampa FL 33622-5118

Jerry Nicholas  
8324 Oxford Circle  
Wichita, KS 67226

W&H Enerterprises, LLC  
Attn: Darrin Wildeman and Bret  
9229 E Lincoln Ct.  
Wichita, KS 67207

Claremont Apartments  
9100 E Harry  
Wichita, KS 67207

John Pharm  
2216 Ridgewood  
Wichita KS 67218

W&H Enterprises, LLC  
Attn: Darrin Wildeman or Bret H  
9229 E Lincoln Ct.  
Wichita, KS 67207

Community Bank  
11330 E 21st Street  
Wichita KS 67206

Kansas Counselors Inc  
1421 N Saint Paul Street  
Wichita KS 67203-1718

W&H Enterprises, LLC  
9229 E Lincoln Ct  
Wichita, KS 67207

Cox Communications Residential  
Attn Bankruptcy  
1400 Lake Hearn Drive  
Atlanta GA 30319

Kansas Department of Labor  
Attn Legal Services  
401 SW Topeka  
Topeka KS 66603-3182

Wall and Associates  
PO Box 605  
Haymarket VA 20168

Deans Auto Service  
2885 S Hillside Street  
Wichita KS 67216-2546

Kansas Dept of Revenue  
Civil Tax Enforcement  
PO Box 12005  
915 SW Harrison  
Topeka KS 66612-2005

Westar Energy  
PO Box 208  
Wichita KS 67201

Erik C. Baker  
6003 SW 23rd Terrace  
Topeka KS 66614

Kansas Gas Service  
Attn Bankruptcy Team  
PO Box 3535  
Topeka KS 66601-3535

Wichita Water Utilities  
City Hall 8th Floor  
455 N Main  
Wichita KS 67202

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION

IN RE:  
House of Hope, Inc.

CHAPTER 11

DEBTOR(S)

CASE NO

**LIST OF EQUITY SECURITY HOLDERS**

Registered Name of Holder of Security Last Known Address or Place of Business	Class of Security	Number Registered	Kind of Interest Registered
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**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: 11/17/2010

Signature: /s/ Alma C. Johnson  
Alma C. Johnson  
President

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION**

In re: **House of Hope, Inc.**

CASE NO

CHAPTER 11

**BUSINESS INCOME AND EXPENSES**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

**PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:**

1. Gross Income for 12 Months Prior to Filing: \$2,332,836.12

**PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:**

2. Gross Monthly Income: \$193,083.00

**PART C - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:**

3. Net Employee Payroll (Other Than Debtor):	<u>\$106,189.00</u>
4. Payroll Taxes:	<u>\$11,500.00</u>
5. Unemployment Taxes:	<u>\$0.00</u>
6. Worker's Compensation:	<u>\$3,166.00</u>
7. Other Taxes:	<u>\$0.00</u>
8. Inventory Purchases (including raw materials):	<u>\$0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray:	<u>\$0.00</u>
10. Rent (other than debtor's principal residence):	<u>\$24,500.00</u>
11. Utilities:	<u>\$10,500.00</u>
12. Office Expenses and Supplies:	<u>\$850.00</u>
13. Repairs and Maintenance:	<u>\$3,295.65</u>
14. Vehicle Expenses:	<u>\$6,500.00</u>
15. Travel and Entertainment:	<u>\$382.27</u>
16. Equipment Rental and Leases:	<u>\$1,374.58</u>
17. Legal/Accounting/Other Professional Fees:	<u>\$5,484.04</u>
18. Insurance:	<u>\$4,886.02</u>
19. Employee Benefits (e.g., pension, medical, etc.):	<u>\$47.81</u>
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify):	<u>None</u>
21. Other (Specify):	
<b>Contract Labor</b>	<u>\$2,094.00</u>
<b>Leased Labor</b>	<u>\$571.43</u>
<b>Drug Testing and Background Checks</b>	<u>\$605.58</u>
<b>Housing Supplies</b>	<u>\$694.33</u>
<b>Food for Clients</b>	<u>\$8,414.68</u>
<b>Client Supplies and activities</b>	<u>\$1,359.57</u>
<b>Security/Alarm Services</b>	<u>\$321.23</u>
<b>Technical Support</b>	<u>\$824.77</u>
<b>Cable/Internet Expense</b>	<u>\$846.37</u>
<b>Telephone/Cell Phone Expense</b>	<u>\$2,813.39</u>
<b>Misc Licenses and Fees</b>	<u>\$9.29</u>
<b>Advertising</b>	<u>\$99.21</u>
<b>Bad Debts/NSF Checks</b>	<u>\$3.43</u>
<b>Client Medical Expenses</b>	<u>\$1,030.94</u>
<b>Bank Charges</b>	<u>\$602.69</u>
<b>Education and Seminars</b>	<u>\$55.29</u>
<b>Interest Expense</b>	<u>\$1.00</u>

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF KANSAS  
KANSAS CITY DIVISION

In re: **House of Hope, Inc.**

CASE NO

CHAPTER 11

**BUSINESS INCOME AND EXPENSES**

*Continuation Sheet No. 1*

**Miscellaneous Expenses** \$52.68

**Moving Expenses** \$67.02

22. Total Monthly Expenses (Add items 3 - 21) \$199,142.25

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2): (\$6,059.25)