

B1 (Official Form 1)(4/10)

**United States Bankruptcy Court
District of Massachusetts**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Cuddy, Robert M.	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): DBA Bob's Disposal	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) xxx-xx-5866	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): 310 Dean Street Norwood, MA	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 02062	ZIP Code
County of Residence or of the Principal Place of Business: Norfolk	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor (if different from street address above):

Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
---	--	---

Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 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). 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).
--	---

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

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Cuddy, Robert M.</p>
--	---

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: MASSACHUSETTS EASTERN DISTRICT	Case Number: 06-14417	Date Filed: 11/27/06
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;">Exhibit A</p> <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 type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit 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 delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p>X <u>/s/ Timothy M. Mauser</u> May 20, 2010 Signature of Attorney for Debtor(s) (Date) Timothy M. Mauser 542050</p>
---	--

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

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):
Cuddy, Robert M.

Signature(s) of Debtor(s) (Individual/Joint)
I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.
X /s/ Robert M. Cuddy
Signature of Debtor **Robert M. Cuddy**
X
Signature of Joint Debtor

Telephone Number (If not represented by attorney)
May 20, 2010
Date

Signatures
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/ Timothy M. Mauser
Signature of Attorney for Debtor(s)
Timothy M. Mauser 542050
Printed Name of Attorney for Debtor(s)
Law Firm of Timothy M. Mauser, Esq.
Firm Name
Suite 240
1 Center Plaza
Boston, MA 02108
Address
Email: tmauser@mauserlaw.com
617-338-9080 Fax: 617-275-8990
Telephone Number
May 20, 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 Debtor (Corporation/Partnership)
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
X
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of 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.

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court
District of Massachusetts**

In re Robert M. Cuddy
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)	(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>
AFNI/VERIZON EAST PO BOX 3037 Bloomington, IL 61702	AFNI/VERIZON EAST PO BOX 3037 Bloomington, IL 61702	PER 11/17/2008 PROOF OF CLAIM		1,943.25
CANANWILL, INC. 1000 MILWAUKEE AVENUE Glenview, IL 60025	CANANWILL, INC. 1000 MILWAUKEE AVENUE Glenview, IL 60025	LOAN		5,060.00
CARITAS MEDICAL GROUP 944 WASHINGTON STREET ! South Easton, MA 02375	CARITAS MEDICAL GROUP 944 WASHINGTON STREET ! South Easton, MA 02375			551.00
CHASE HOME FINANCE 3415 VISION DRIVE Columbus, OH 43219	CHASE HOME FINANCE 3415 VISION DRIVE Columbus, OH 43219	310 DEAN STREET NORWOOD, MA 02062		412,999.00 (400,000.00 secured)
CREDIT ONE BANK P.O. BOX 98873 Las Vegas, NV 89193	CREDIT ONE BANK P.O. BOX 98873 Las Vegas, NV 89193	CREDIT CARD PURCHASES		1,816.00
CYN ENVIRONMENTAL SER 100 Tosca Drive Post Office Box 0119 Stoughton, MA 02072	CYN ENVIRONMENTAL SER 100 Tosca Drive Post Office Box 0119 Stoughton, MA 02072			1,994.00
FAULKNER HOSPITAL P.O. BOX 414240 BOSTON, MA 02241-4240	FAULKNER HOSPITAL P.O. BOX 414240 BOSTON, MA 02241-4240			684.00
FORD MOTOR CREDIT COMPANY, LLC P.O. BOX 537901 Livonia, MI 48153	FORD MOTOR CREDIT COMPANY, LLC P.O. BOX 537901 Livonia, MI 48153	2004 FORD F450, 75,000 MILES		13,870.43 (0.00 secured)
HOSPITALIST PARTNERS LLC 944 WASHINGTON ST. #1 C/O DOCTORS MANAGEMENT South Easton, MA 02375-1177	HOSPITALIST PARTNERS LLC 944 WASHINGTON ST. #1 C/O DOCTORS MANAGEMENT South Easton, MA 02375-1177			650.00
Internal Revenue Service 15 New Sudbury Street Boston, MA 02203	Internal Revenue Service 15 New Sudbury Street Boston, MA 02203			117,779.71

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

In re **Robert M. Cuddy**

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>
Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114	Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114	FEDERAL TAXES OWED, 2004, 2005, 2006 and 2007		117,758.12
MANN & RODGERS FUNERAL HOME, INC. 44 PERKINS STREET P.O. BOX 30009 Jamaica Plain, MA 02130	MANN & RODGERS FUNERAL HOME, INC. 44 PERKINS STREET P.O. BOX 30009 Jamaica Plain, MA 02130	SERVICES		3,986.00
Massachusetts Department of Revenue Bankruptcy Unit P.O. Box 9564 Boston, MA 02114	Massachusetts Department of Revenue Bankruptcy Unit P.O. Box 9564 Boston, MA 02114	PER PROOF OF CLAIM, STATE TAXES OWED		11,332.22
Massachusetts Department of Revenue Bankruptcy Unit P.O. Box 9564 Boston, MA 02114	Massachusetts Department of Revenue Bankruptcy Unit P.O. Box 9564 Boston, MA 02114			3,257.68
NORTHERN LEASING SYSTEM 132 W 31ST ST FL 14 New York, NY 10001	NORTHERN LEASING SYSTEM 132 W 31ST ST FL 14 New York, NY 10001	BALANCE OWING ON EARLY TERMINATION LEASE		1,775.00
ROCKLAND TRUST COMPANY 8A STATION STREET Middleboro, MA 02346	ROCKLAND TRUST COMPANY 8A STATION STREET Middleboro, MA 02346	2002 OLDS BRAVADA, 90,000 MILES		4,569.00
SAFETY INSURANCE COMPANY 20 CUSTOM HOUSE STREET Boston, MA 02110	SAFETY INSURANCE COMPANY 20 CUSTOM HOUSE STREET Boston, MA 02110	AUTO INSURANCE		12,574.46
VERIZON - BANKRUPTCY DEPARTMENT 3900 WASHINGTON ST. Wilmington, DE 19802	VERIZON - BANKRUPTCY DEPARTMENT 3900 WASHINGTON ST. Wilmington, DE 19802	SERVICES		1,935.00
WYNDHAM VACATION OWNERSHIP, INC. C/O C. BRIAN MEADORS 315 NORTH SEVENTH STREET P.O. DRAWER 848 Fort Smith, AR 72902-0848	WYNDHAM VACATION OWNERSHIP, INC. C/O C. BRIAN MEADORS 315 NORTH SEVENTH STREET Fort Smith, AR 72902-0848			650.00
WYNDHAM VACATION OWNERSHIP, INC. C/O C. BRIAN MEADORS 315 NORTH SEVENTH STREET P.O. DRAWER 848 Fort Smith, AR 72902-0848	WYNDHAM VACATION OWNERSHIP, INC. C/O C. BRIAN MEADORS 315 NORTH SEVENTH STREET Fort Smith, AR 72902-0848	GRAND DESERT RESORTS, LAS VEGAS, NV TIMESHARE		9,609.01

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

In re **Robert M. Cuddy**

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, **Robert M. Cuddy**, 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 **May 20, 2010**

Signature **/s/ Robert M. Cuddy**

Robert M. Cuddy

Debtor

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

In re Robert M. Cuddy 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 Robert M. Cuddy
Debtor

Case No. _____

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 T 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. Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114	-	FEDERAL TAXES OWED, 2004, 2005, 2006 and 2007				117,758.12	0.00 117,758.12
Account No. Massachusetts Department of Revenue Bankruptcy Unit P.O. Box 9564 Boston, MA 02114	-	PER PROOF OF CLAIM, STATE TAXES OWED				11,332.22	0.00 11,332.22
Account No.							
Account No.							
Account No.							

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

Subtotal
(Total of this page) **129,090.34** **0.00**
129,090.34

Total
(Report on Summary of Schedules) **129,090.34** **0.00**
129,090.34

A. REBECCA MURRAY, ESQ.
HARMON LAW OFFICES, P.C.
P.O. BOX 610345
Newton Highlands, MA 02461-0389

AFNI/VERIZON EAST
PO BOX 3037
Bloomington, IL 61702

AMSHER COLLECTION SERVIC
1816 3RD AVE N
Birmingham, AL 35203

BWPO-DBA DEPT OF PRIMARY
PO BOX 414152
Boston, MA 02241-4152

CANANWILL, INC.
1000 MILWAUKEE AVENUE
Glenview, IL 60025

CAP ONE BK
PO BOX 85015
Richmond, VA 23285

CARITAS MEDICAL GROUP
944 WASHINGTON STREET !
South Easton, MA 02375

CHASE HOME FINANCE
3415 VISION DRIVE
Columbus, OH 43219

CREDIT ONE BANK
P.O. BOX 98873
Las Vegas, NV 89193

CYN ENVIRONMENTAL SER
100 Tosca Drive
Post Office Box 0119
Stoughton, MA 02072

ECAST SETTLEMENT CORPORATION
P.O. BOX 35480
Newark, NJ 07193-5480

FAULKNER HOSPITAL
P.O. BOX 414240
BOSTON, MA 02241-4240

FINGERHUT DIRECT MARKETING, INC.
6250 RIDGEWOOD ROAD
Saint Cloud, MN 56303

FORD MOTOR CREDIT
P.O. BOX 542000
Omaha, NE 68154

FORD MOTOR CREDIT COMPANY
C/O NAIR & LEVIN, P.C.
707 BLOOMFIELD AVENUE
Bloomfield, CT 06002

FORD MOTOR CREDIT COMPANY
P.O. BOX 537901
Livonia, MI 48153

FORD MOTOR CREDIT COMPANY, LLC
P.O. BOX 537901
Livonia, MI 48153

HOSPITALIST PARTNERS LLC
944 WASHINGTON ST. #1
C/O DOCTORS MANAGEMENT
South Easton, MA 02375-1177

HSBC BANK
P.O. BOX 5253
Carol Stream, IL 60197

HSBC NV
PO BOX 19360
Portland, OR 97208

Internal Revenue Service
P.O. Box 21126
Philadelphia, PA 19114

Internal Revenue Service
15 New Sudbury Street
Boston, MA 02203

JEFFERSON CAPITAL SYSTEMS, LLC
P.O. BOX 7999
Saint Cloud, MN 56302

JOHN PENROSE, MD
944 WASHINGTON STREET #1
DOCTOR'S MANAGEMENT
South Easton, MA 02375-1177

MANN & RODGERS FUNERAL HOME, INC.
44 PERKINS STREET
P.O. BOX 30009
Jamaica Plain, MA 02130

Massachusetts Department of Revenue
Bankruptcy Unit
P.O. Box 9564
Boston, MA 02114

MITCHELL J. LEVINE, ESQ.
NAIL & LEVIN, P.C.
707 BLOOMFIELD AVE.
Bloomfield, CT 06002

NEPONSET VALLEY SURGICAL
800 WASHINGTON STREET
Canton, MA 02021

NORTHERN LEASING SYSTEM
132 W 31ST ST FL 14
New York, NY 10001

PROFESSIONAL SERVICES OF
NORWOOD
PO BOX 3549
Boston, MA 02241

RADIOLOGY ASSOC OF
NORWOOD
C/O PETER ROBERTS & ASSOC
231 E MAIN STE 2A
Milford, MA 01757

ROCKLAND TRUST COMPANY
8A STATION STREET
Middleboro, MA 02346

ROCKLAND TRUST COMPANY
C/O JACK MIKELS & ASSOCIATES, LLP
1 BATTERYMARCH PARK, SUITE 309
Quincy, MA 02169

SAFETY INSURANCE COMPANY
20 CUSTOM HOUSE STREET
Boston, MA 02110

SURG. HOSP. OF NORWOOD
C/O DOCTOR'S MANAGEMENT
944 WASHINGTON STREET #1
South Easton, MA 02375-1177

TRIBUTE/FBOFD
6 CONCOURSE PKWY NE FL 2
Atlanta, GA 30328

VERIZON - BANKRUPTCY DEPARTMENT
3900 WASHINGTON ST.
Wilmington, DE 19802

WYNDHAM VACATION OWNERSHIP, INC.
C/O C. BRIAN MEADORS
315 NORTH SEVENTH STREET
P.O. DRAWER 848
Fort Smith, AR 72902-0848

WYNDHAM VACATION RESORTS, INC.
C/O CYNTHIA POTEET
10750 WEST CHARLESTON BLVD.
SUITE 130
Las Vegas, NV 89135