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B1 (Official Form 1)(4/10)											
	States Bankruj strict of Massach	ourt				Volunta	ry Petition				
Name of Debtor (if individual, enter Last, First, QUIRK, PAUL F	Middle):		Name of Joint Debtor (Spouse) (Last, First, Middle):								
All Other Names used by the Debtor in the last a (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-Taxpa (if more than one, state all) xxx-xx-1788	yer I.D. (ITIN) No./Com	plete EIN	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, a 65 EAST INDIA ROW #15G Boston, MA		IP Code	Street	Address of	Joint Debtor	(No. and Stree	et, City, and State	e): ZIP Code			
	021	10									
County of Residence or of the Principal Place of Suffolk						Principal Plac					
Mailing Address of Debtor (if different from stre	eet address):		Mailin	g Address	of Joint Debt	tor (if different	from street addre	ess):			
		CIP Code						ZIP Code			
Location of Principal Assets of Business Debtor (if different from street address above):											
Type of Debtor	Nature of B	usiness			Chapter	of Bankrupt	cy Code Under V	Which			
(Form of Organization)	(Check one	e box)			the l	Petition is File	d (Check one bo	x)			
(Check one box)	Health Care Busine		Chapter 7								
Individual (includes Joint Debtors)	□ Single Asset Real E in 11 U.S.C. § 101										
See Exhibit D on page 2 of this form.	Railroad	(312)		Chapt			e	e			
Corporation (includes LLC and LLP)	☐ Stockbroker			Chapt			pter 15 Petition f Foreign Nonmai				
□ Partnership	Commodity Broker			Chapt	er 13	01 a	Foleigii Nollillai	II Floceeding			
 Other (If debtor is not one of the above entities, 	Clearing Bank					Natura	f Dobta				
check this box and state type of entity below.)		E 4:4	(Check one box)								
	Tax-Exempt (Check box, if a		Debts are primarily consumer debts, Debts are primarily								
	Debtor is a tax-exer under Title 26 of th Code (the Internal I	mpt organiz e United St	tates "incurred by an individual primarily for								
Filing Fee (Check one box	.)	Check one	e box: Chapter 11 Debtors								
Full Filing Fee attached						ned in 11 U.S.C.					
☐ Filing Fee to be paid in installments (applicable to	individuals only). Must		or is not	a small busi	ness debtor as o	defined in 11 U.S	S.C. § 101(51D).				
attach signed application for the court's consideration	on certifying that the	Check if:	or's ager	egate nonco	ntingent liquid	ated debts (exclu	ding debts owed to	insiders or affiliates)			
debtor is unable to pay fee except in installments. Form 3A.	Rule 1006(b). See Official							three years thereafter).			
☐ Filing Fee waiver requested (applicable to chapter	7 individuals only) Must	I '	l applicable boxes:								
attach signed application for the court's consideration		- ·	plan is being filed with this petition. ceptances of the plan were solicited prepetition from one or more classes of creditors,								
					S.C. § 1126(b).			510411070,			
Statistical/Administrative Information						THIS S	PACE IS FOR COU	JRT USE ONLY			
Debtor estimates that funds will be available	for distribution to unsec	ured credito	ors.								
Debtor estimates that, after any exempt prop there will be no funds available for distributi			expense	s paid,							
Estimated Number of Creditors	si to ansecured creator					-					
1- 50- 100- 200- 49 99 199 999	001- 000	50,001- 100,000	OVER 100,000								
Estimated Assets	5,000 10,000 25	,000 50,				1					
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million	to \$10 to \$50 to \$	0,000,001 \$10 \$100 to \$ lion mill		\$500,000,001 to \$1 billion							
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	to \$10 to \$50 to \$	\$100 to \$	0,000,001 500	\$500,000,001 to \$1 billion							
million	million million mil	lion mill	lion								

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B1 (Official For	Document	Page 2 of 9	Page 2
Voluntar	y Petition	Name of Debtor(s): QUIRK, PAUL F	
(This page mu	st be completed and filed in every case)	QUIRK, PAUL P	
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad	ditional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	n one, attach additional sheet)
Name of Debt - None -	or:	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A		hibit B whose debts are primarily consumer debts.)
forms 10K a pursuant to S	bleted if debtor is required to file periodic reports (e.g., nd 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	I, the attorney for the petitioner named have informed the petitioner that [he o 12, or 13 of title 11, United States Coc	I in the foregoing petition, declare that I or she] may proceed under chapter 7, 11, de, and have explained the relief available ify that I delivered to the debtor the notice
Exhibit	A is attached and made a part of this petition.	${f X}$ /s/ Timothy M. Mauser	June 2, 2010
		Signature of Attorney for Debtor(s) Timothy M. Mauser 54205	
		ibit C	
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	e harm to public health or safety?
~~ I		ibit D	
-	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made		a separate Exhibit D.)
If this is a joi		a part of ans perition.	
Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition.	
	Information Regardin	g the Debtor - Venue	
	(Check any ap	• ·	
	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	a longer part of such 180 days than in	n any other District.
	There is a bankruptcy case concerning debtor's affiliate, ge		
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or th sought in this District.	in the United States but is a defendant	nt in an action or
	Certification by a Debtor Who Reside (Check all app		·ty
	Landlord has a judgment against the debtor for possession		complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment		
	Debtor has included in this petition the deposit with the co after the filing of the petition.	urt of any rent that would become due	e during the 30-day period

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

ase	10-16068	Doc 1	File

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B1 (Official Form 1)(4/10)	Document	Page 3 of 9 Page 3
Voluntary Petition		Name of Debtor(s):
		QUIRK, PAUL F
(This page must be completed and filed in every case)	Signa	turoc
Signature(s) of Debtor(s) (Individual/Join	0	
I declare under penalty of perjury that the information provid	<i>,</i>	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition
petition is true and correct.		is true and correct, that I am the foreign representative of a debtor in a foreign
If petitioner is an individual whose debts are primarily consults and the second secon	umer debts and	proceeding, and that I am authorized to file this petition.
has chosen to file under chapter 7] I am aware that I may pro- chapter 7, 11, 12, or 13 of title 11, United States Code, under	rstand the relief	(Check only one box.)
available under each such chapter, and choose to proceed un	der chapter 7.	☐ I request relief in accordance with chapter 15 of title 11. United States Code.
[If no attorney represents me and no bankruptcy petition pre petition] I have obtained and read the notice required by 11		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
I request relief in accordance with the chapter of title 11, Uni specified in this petition.	ited States Code,	recognition of the foreign main proceeding is attached.
·r·····		X 7
X_/s/ PAUL F QUIRK		X
Signature of Debtor PAUL F QUIRK		Signature of Foreign Representative
X		Printed Name of Foreign Representative
Signature of Joint Debtor		
		Date
Telephone Number (If not represented by attorney)		Signature of Non-Attorney Bankruptcy Petition Preparer
June 2, 2010		
Date		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
Signature of Attorney*		compensation and have provided the debtor with a copy of this document
Signature of fittoriney		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
X /s/ Timothy M. Mauser		pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services
Signature of Attorney for Debtor(s)		chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a
_Timothy M. Mauser 542050		debtor or accepting any fee from the debtor, as required in that section.
Printed Name of Attorney for Debtor(s)		Official Form 19 is attached.
Law Firm of Timothy M. Mauser, Esq.		
Firm Name		Printed Name and title, if any, of Bankruptcy Petition Preparer
Suite 240		
1 Center Plaza Boston, MA 02108		Social-Security number (If the bankrutpcy petition preparer is not
		an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition
Address		preparer.)(Required by 11 U.S.C. § 110.)
Email: tmauser@mauser	rlaw.com	
617-338-9080 Fax: 617-275-8990		
Telephone Number		
June 2, 2010		Address
Date *In a case in which § 707(b)(4)(D) applies, this signature als	o constitutes a	
certification that the attorney has no knowledge after an inqu		X
information in the schedules is incorrect.		
Signature of Debtor (Corporation/Partner	rshin)	Date
Signature of Debior (Corporation/1 at met	······································	Signature of Bankruptcy Petition Preparer or officer, principal, responsible
I declare under penalty of perjury that the information provid	ded in this	person, or partner whose Social Security number is provided above.
petition is true and correct, and that I have been authorized to on behalf of the debtor.	o file this petition	Names and Social-Security numbers of all other individuals who prepared or
		assisted in preparing this document unless the bankruptcy petition preparer is
The debtor requests relief in accordance with the chapter of t States Code, specified in this petition.	uue 11, United	not an individual:
X		
Signature of Authorized Individual		
		If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Printed Name of Authorized Individual		
		A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in
Title of Authorized Individual		fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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B4 (Official Form 4) (12/07)

United States Bankruptcy Court District of Massachusetts

In re **PAUL F QUIRK**

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)
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]
BANK OF AMERICA 4161 PEIDMONT PARKWAY Greensboro, NC 27410	BANK OF AMERICA 4161 PEIDMONT PARKWAY Greensboro, NC 27410	REVOLVING		24,028.00
BANK OF AMERICA PO BOX 1598 Norfolk, VA 23501	BANK OF AMERICA PO BOX 1598 Norfolk, VA 23501	REVOLVING		10,984.00
CHASE PO BOX 15298 Wilmington, DE 19850	CHASE PO BOX 15298 Wilmington, DE 19850	REVOLVING		28,229.00
CITI CARDS P.O. BOX 6500 Sioux Falls, SD 57117	CITI CARDS P.O. BOX 6500 Sioux Falls, SD 57117	REVOLVING		38,904.00
MIDLAND CREDIT MANAGEMENT 8875 AERO DRIVE San Diego, CA 92123	MIDLAND CREDIT MANAGEMENT 8875 AERO DRIVE San Diego, CA 92123	CITIBANK/SEARS PREMEIR CARD		1,222.00
PORTFOLIO RECOVERY ASSOC RIVERSIDE COMMERCE CENTER 120 CORPORATE BLVD STE 100 Norfolk, VA 23502	PORTFOLIO RECOVERY ASSOC RIVERSIDE COMMERCE CENTER 120 CORPORATE BLVD STE 100 Norfolk, VA 23502	COLLECTION ACCOUNT ORIGINAL CREDITOR: FLEET/BANK OF AMERICA		8,357.00
SLM FINANCIAL CORPORATION C/O JASON B. COHEN, ESQ. PRESSMAN & KRUSKAL 687 MASSACHUSETTS AVENUE Cambridge, MA 02139	SLM FINANCIAL CORPORATION C/O JASON B. COHEN, ESQ. PRESSMAN & KRUSKAL Cambridge, MA 02139			Unknown (Unknown secured)

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B4 (Official Form 4) (12/07) - Cont. In re PAUL F QUIRK

Debtor(s)

Case No.

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

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

I, **PAUL F QUIRK**, 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 June 2, 2010

Signature /s/ PAUL F QUIRK PAUL F QUIRK 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.

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

In re

PAUL F QUIRK

Case No.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor

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

other security interests. List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided. If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.) Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding secured claims to report on this Schedule D. Check this box if debtor has no creditors holding secured claims to report on this Schedule D. п

CREDITOR'S NAME	C	Hu	sband, Wife, Joint, or Communi	ty	C	UN	D	AMOUNT OF	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C H	NATURE DESCRIPTION OF P	WAS INCURRED, OF LIEN, AND ON AND VALUE ROPERTY CT TO LIEN	E N		D I S P U T E D	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.					Т	A T E D			
SLM FINANCIAL CORPORATION C/O JASON B. COHEN, ESQ. PRESSMAN & KRUSKAL 687 MASSACHUSETTS AVENUE Cambridge, MA 02139		-	Value \$	Unknown	-			Unknown	Unknown
Account No.									
			Value \$						
Account No.			Value \$		-				
Account No.					$\left \right $				
			Value \$				Ļ		
0 continuation sheets attached				S (Total of th	ubto nis p			0.00	0.00
			(Report on Summary of Sc		ota ule		0.00	0.00

Document

B6F (Official Form 6F) (12/07)

In re

PAUL F QUIRK

Debtor

Case No._____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

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

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C M H H				S P U T E D	AMOUNT OF CLAIM
Account No.			REVOLVING	٦ ^N	A T E D		
BANK OF AMERICA PO BOX 1598 Norfolk, VA 23501		-					
Account No.			REVOLVING	+			10,984.00
BANK OF AMERICA 4161 PEIDMONT PARKWAY Greensboro, NC 27410		-					
A			REVOLVING				24,028.00
Account No. CHASE PO BOX 15298 Wilmington, DE 19850		-	REVOLVING				
Account No.			REVOLVING	_			28,229.00
CITI CARDS P.O. BOX 6500 Sioux Falls, SD 57117		-					
							38,904.00
continuation sheets attached			(Total o	Sub this			102,145.00

(Total of this page)

Document

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Case No._____

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

PAUL F QUIRK In re

Debtor

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

	-	_					1
CREDITOR'S NAME,	C O		sband, Wife, Joint, or Community		N		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NTINGEN		D I S P U T E D	AMOUNT OF CLAIM
Account No.			CITIBANK/SEARS PREMEIR CARD	Ť	D A T E D		
MIDLAND CREDIT MANAGEMENT 8875 AERO DRIVE San Diego, CA 92123		-			D		1,222.00
Account No.			COLLECTION ACCOUNT	+	+	+	,
PORTFOLIO RECOVERY ASSOC RIVERSIDE COMMERCE CENTER 120 CORPORATE BLVD STE 100 Norfolk, VA 23502		-	ORIGINAL CREDITOR: FLEET/BANK OF AMERICA				
							8,357.00
Account No.					t	┢	
	1						
Account No.				+		+	
Account No.							
Account No.				+		╈	
	1						
Sheet no1 of _1 sheets attached to Schedule of				Sub			9,579.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)	3,513.00
					Fot		111,724.00
			(Report on Summary of S	che	dul	es)	111,724.00

BANK OF AMERICA PO BOX 1598 Norfolk, VA 23501

BANK OF AMERICA 4161 PEIDMONT PARKWAY Greensboro, NC 27410

CHASE PO BOX 15298 Wilmington, DE 19850

CITI CARDS P.O. BOX 6500 Sioux Falls, SD 57117

MIDLAND CREDIT MANAGEMENT 8875 AERO DRIVE San Diego, CA 92123

PORTFOLIO RECOVERY ASSOC RIVERSIDE COMMERCE CENTER 120 CORPORATE BLVD STE 100 Norfolk, VA 23502

SLM FINANCIAL CORPORATION C/O JASON B. COHEN, ESQ. PRESSMAN & KRUSKAL 687 MASSACHUSETTS AVENUE Cambridge, MA 02139