

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF MARYLAND

Case number *(if known)* \_\_\_\_\_ Chapter 11 Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Linton Shafer Computer Services, Inc.</u>	
2. All other names debtor used in the last 8 years <small>Include any assumed names, trade names and <i>doing business as</i> names</small>	<u>DBA Accounting Support Services</u> <u>DBA Accounting Software Services</u>	
3. Debtor's federal Employer Identification Number (EIN)	<u>52-1294803</u>	
4. Debtor's address	<b>Principal place of business</b>  <u>333 West Patrick St.</u> <b>Frederick, MD 21701</b> <small>Number, Street, City, State &amp; ZIP Code</small>  <u>Frederick</u> <small>County</small>	<b>Mailing address, if different from principal place of business</b>  <hr/> <small>P.O. Box, Number, Street, City, State &amp; ZIP Code</small>  <b>Location of principal assets, if different from principal place of business</b>  <hr/> <small>Number, Street, City, State &amp; ZIP Code</small>
5. Debtor's website (URL)	<u>_____</u>	
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business**

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- No.
- Yes.

If more than 2 cases, attach a separate list.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- No
- Yes.

List all cases. If more than 1, attach a separate list

Debtor \_\_\_\_\_ Relationship \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (if known) \_\_\_\_\_

11. Why is the case filed in this district? *Check all that apply:*

Debtor has had its domicile, 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.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** *(Check all that apply.)*

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code

**Is the property insured?**

No

Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

**Statistical and administrative information**

13. Debtor's estimation of available funds *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

15. Estimated Assets

<input checked="" type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of authorized representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  
 I have been authorized to file this petition on behalf of the debtor.  
 I have examined the information in this petition and have a reasonable belief that the information is true and correct.  
 I declare under penalty of perjury that the foregoing is true and correct.  
 Executed on October 10, 2017  
MM / DD / YYYY

/s/ Barbara A. Brewster  
Signature of authorized representative of debtor  
 Title President

Barbara A. Brewster  
Printed name

**18. Signature of attorney**

/s/ Craig M. Palik (cpalik@mhlawyers.com)  
Signature of attorney for debtor

Date October 10, 2017  
MM / DD / YYYY

Craig M. Palik (cpalik@mhlawyers.com)  
Printed name

McNamee Hosea  
Firm name

6411 Ivy Lane, Ste. 200  
Greenbelt, MD 20770  
Number, Street, City, State & ZIP Code

Contact phone (301) 441-2420 Email address \_\_\_\_\_

15254  
Bar number and State

**Fill in this information to identify the case:**Debtor name Linton Shafer Computer Services, Inc.United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule* \_\_\_\_\_
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 10, 2017X /s/ Barbara A. Brewster

Signature of individual signing on behalf of debtor

Barbara A. Brewster

Printed name

President

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name	<b>Linton Shafer Computer Services, Inc.</b>
United States Bankruptcy Court for the:	<b>DISTRICT OF MARYLAND</b>
Case number (if known):	_____

Check if this is an amended filing

**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Comus Inn at Sugarloaf Mountain, LLC 23900 Old Hundred Rd. Dickerson, MD 20842		Complaint	Disputed			\$270,000.00
Michael Tauraso o/b/o TR Bakery, Inc. 122 S. Market St. Frederick, MD 21701		Complaint (partially duplicative of claim of Pit Boss MSF, Inc.)	Disputed			\$88,689.00
Pit Boss MSF Inc. 122 S. Market St. Frederick, MD 21701		Complaint (partially duplicative of claim of Michael Tauraso o/b/o TR Bakery, Inc.)	Disputed			\$88,689.00
Diane E. Ferren t/a Sky's the Limit P.O. Box 425 Shepherdstown, WV 25443-0425			Disputed			\$51,162.18
The Visitation Academy Incorporated Ray Speciale, Treasurer P.O. Box 75 Frederick, MD 21705			Disputed			\$8,344.82
Law Office of Richard Winters, LLC 127 West Patrick St. Frederick, MD 21701		Legal Services				\$1,836.00

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (if known) \_\_\_\_\_

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Vanguard P.O. Box 1110 Valley Forge, PA 19482-1110		Simple IRA withholding				\$1,675.33
Kathleen Tara Richards 4526 Timbery Dr. Jefferson, MD 21755		Wages - vacation				\$1,039.78
Teresa W. Plumley 1719 Greenfield Rd. Adamstown, MD 21710		Wages- vacation				\$613.20
Denise S. Gouker 8223 Old Hagerstown Rd. Middletown, MD 21769		Wages - Vacation				\$543.00
Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346		FUTA				\$392.01
Lynn A. Drummond 1904 Antero Ct. Frederick, MD 21702		Wages - Vacation				\$199.92
Teresa W. Plumley 1719 Greenfield Rd. Adamstown, MD 21710		Health Savings Plan				\$100.32
Emily Carroll 11 Holder Ct. Boonsboro, MD 21713		Wages - Vacation				\$96.45
Tiffany Harris 128 N. Main St. Union Bridge, MD 21791		Wages - vacation				\$62.48
DLLR State of Maryland Ofc of Unemployment Ins. Contr. Div. 1100 North Eutaw St., Room 401 Baltimore, MD 21201		SUTA				\$6.76

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

1. <b>Schedule A/B: Assets-Real and Personal Property</b> (Official Form 206A/B)		
1a. <b>Real property:</b>		
Copy line 88 from <i>Schedule A/B</i> .....	\$	<u>0.00</u>
1b. <b>Total personal property:</b>		
Copy line 91A from <i>Schedule A/B</i> .....	\$	<u>75,557.87</u>
1c. <b>Total of all property:</b>		
Copy line 92 from <i>Schedule A/B</i> .....	\$	<u>75,557.87</u>

**Part 2: Summary of Liabilities**

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D)		
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$	<u>0.00</u>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)		
3a. <b>Total claim amounts of priority unsecured claims:</b>		
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$	<u>4,729.25</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b>		
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$	<u>508,721.00</u>
4. <b>Total liabilities</b> .....		
Lines 2 + 3a + 3b	\$	<u>513,450.25</u>

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

# Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
- Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest
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3.	Checking, savings, money market, or financial brokerage accounts <i>(Identify all)</i>	Type of account	Last 4 digits of account number	
3.1.	<u>PNC Bank</u>	<u>Checking account</u>	<u>6612</u>	<u>\$7,689.83</u>

4. **Other cash equivalents** *(Identify all)*

5. **Total of Part 1.** **\$7,689.83**  
 Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
- Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
- Yes Fill in the information below.

11.	<b>Accounts receivable</b>			
	11a. 90 days old or less:	<u>34,831.60</u>	-	<u>0.00</u> = ...
	face amount		doubtful or uncollectible accounts	<u>\$34,831.60</u>

Debtor Linton Shafer Computer Services, Inc.  
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11b. Over 90 days old: 7,536.44 - 0.00 =... \$7,536.44  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**  
Current value on lines 11a + 11b = line 12. Copy the total to line 82.

<b>\$42,368.04</b>
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**Part 4: Investments**

13. Does the debtor own any investments?

- No. Go to Part 5.
- Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
- Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
- Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
- Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Kitchen table w/ 6 chairs - \$600; Work table - \$15; 2 large open shelf bookcases - \$150; small open bookshelf - \$30; Conference credenza/cabinet - \$300; Long credenza - \$75; Cabinet w/lock & key -\$30; Small side table - \$30; Rolling cart with shelves - \$15; Cubicle section - \$70; 3 desk w/ L return - \$300; Executive desk w/bowed front & file drawer unit w/ Black executive swivel chair - \$ - \$200; 1 lobby chair - \$40; 3 office swivel chairs with arms - \$40; 3 office chairs - \$120 1 office swivel chair w/out arms - \$15; 4-drawer lateral file cabinet (not fireproof - no	\$5,125.00	Liquidation	\$5,125.00

Debtor Linton Shafer Computer Services, Inc.  
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Case number (If known) \_\_\_\_\_

key) - \$100;  
 2-drawer lateral file cabinet (not fireproof - no key) - \$50  
 2 3-drawer lateral file cabinet w/top (not fireproof - no key) - \$60;  
 2-drawer lateral file cabinet (not fireproof - no key) - \$60;  
 3 2-drawer lateral file cabinets (not fireproof-no key) - \$100;  
 2 3-drawer lateral file cabinets (not fireproof) - \$150;  
 Shredder - \$150;  
 5 computers w/ monitor, peripherals, cables - \$500;  
 1 CPU - \$50;  
 2017 Computer & monitor - \$400;  
 2017 Labtop - \$700;  
 older Laptop - \$400;  
 3 Deskjet printers - \$75;  
 Black & white all-in-printer - \$100;  
 Color all-in-on printer \$200

**Barbara's office:**  
 Glass round table w/4 chairs - \$100;  
 Office swivel chair w/arms - \$40;  
 2 lobby chairs - \$80;  
 3-drawer lateral file cabinet w/lock (not fireproof) - \$75;  
 2 2-drawer file cabinets (not fireproof) - \$60;  
 Deskjet printer - \$20;

	<b>\$375.00</b>	<b>Liquidation</b>	<b>\$375.00</b>
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42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** Add lines 39 through 42. Copy the total to line 86. **\$5,500.00**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**  
 No  
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**  
 No  
 Yes

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- No. Go to Part 9.
- Yes Fill in the information below.

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

- No. Go to Part 10.
- Yes Fill in the information below.

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (If known) \_\_\_\_\_

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- No. Go to Part 11.
- Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites <u>bookkeeper-frederick.com</u>	<u>Unknown</u>		<u>Unknown</u>

62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations <u>Customer list</u>	<u>Unknown</u>		<u>Unknown</u>

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

<u>\$0.00</u>
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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- No
- Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
- Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
- Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
- Yes Fill in the information below.

Current value of debtor's interest
------------------------------------

71. Notes receivable  
Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)  
Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Debtor Linton Shafer Computer Services, Inc.  
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Case number (If known) \_\_\_\_\_

**Potential claims against Heather Brady-Sinnott**

**Unknown**

<b>Nature of claim</b>	<b>Potential cross-claims</b>
<b>Amount requested</b>	<b>\$0.00</b>

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

**Fidelity bond - \$25,000.00 (no cash redemption value to estate)**

**\$0.00**

**Loan to Comus Inn - (Disputed)**

**\$20,000.00**

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

<b>\$20,000.00</b>
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79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

No

Yes

Debtor Linton Shafer Computer Services, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$7,689.83</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$42,368.04</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$5,500.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$20,000.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$75,557.87</u>	+ 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$75,557.87</u>

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206E/F**  
**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Denise S. Gouker</b> <b>8223 Old Hagerstown Rd.</b> <b>Middletown, MD 21769</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$543.00</b>	<b>\$543.00</b>
	Date or dates debt was incurred <b>September 2017</b>	Basis for the claim: <b>Wages - Vacation</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>DLLR State of Maryland</b> <b>Ofc of Unemployment Ins. Contr.</b> <b>Div.</b> <b>1100 North Eutaw St., Room 401</b> <b>Baltimore, MD 21201</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6.76</b>	<b>\$6.76</b>
	Date or dates debt was incurred	Basis for the claim: <b>SUTA</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)		
2.3	Priority creditor's name and mailing address <b>Emily Carroll</b> <b>11 Holder Ct.</b> <b>Boonsboro, MD 21713</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <b>Wages - Vacation</b>	\$96.45    \$96.45
	Date or dates debt was incurred <b>September 2017</b>	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Centralized Insolvency Operation</b> <b>P.O. Box 7346</b> <b>Philadelphia, PA 19101-7346</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <b>FUTA</b>	\$392.01    \$392.01
	Date or dates debt was incurred <b>September 2017</b>	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address <b>Kathleen Tara Richards</b> <b>4526 Timbery Dr.</b> <b>Jefferson, MD 21755</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <b>Wages - vacation</b>	\$1,039.78    \$1,039.78
	Date or dates debt was incurred <b>September 2017</b>	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address <b>Lynn A. Drummond</b> <b>1904 Antero Ct.</b> <b>Frederick, MD 21702</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Basis for the claim: <b>Wages - Vacation</b>	\$199.92    \$199.92
	Date or dates debt was incurred <b>September 2017</b>	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Linton Shafer Computer Services, Inc. Case number (if known) \_\_\_\_\_

Name

2.7	Priority creditor's name and mailing address <b>Teresa W. Plumley 1719 Greenfield Rd. Adamstown, MD 21710</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$613.20</b>	<b>\$613.20</b>
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Date or dates debt was incurred  
**September 2017**

Basis for the claim:  
**Wages- vacation**

Last 4 digits of account number  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?  
 No  
 Yes

2.8	Priority creditor's name and mailing address <b>Teresa W. Plumley 1719 Greenfield Rd. Adamstown, MD 21710</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$100.32</b>	<b>\$100.32</b>
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Date or dates debt was incurred  
**September 2017**

Basis for the claim:  
**Health Savings Plan**

Last 4 digits of account number  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)

Is the claim subject to offset?  
 No  
 Yes

2.9	Priority creditor's name and mailing address <b>Tiffany Harris 128 N. Main St. Union Bridge, MD 21791</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$62.48</b>	<b>\$62.48</b>
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Date or dates debt was incurred  
**September 2017**

Basis for the claim:  
**Wages - vacation**

Last 4 digits of account number  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?  
 No  
 Yes

2.10	Priority creditor's name and mailing address <b>Vanguard P.O. Box 1110 Valley Forge, PA 19482-1110</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,675.33</b>	<b>\$1,675.33</b>
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Date or dates debt was incurred  
**September 2017**

Basis for the claim:  
**Simple IRA withholding**

Last 4 digits of account number  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)

Is the claim subject to offset?  
 No  
 Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor Linton Shafer Computer Services, Inc. Case number (if known) \_\_\_\_\_  
Name

3.1 Nonpriority creditor's name and mailing address **Comus Inn at Sugarloaf Mountain, LLC** **23900 Old Hundred Rd. Dickerson, MD 20842** **\$270,000.00**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: Complaint  
 Is the claim subject to offset?  No  Yes

3.2 Nonpriority creditor's name and mailing address **Diane E. Ferren** **t/a Sky's the Limit** **\$51,162.18**  
**P.O. Box 425**  
**Shepherdstown, WV 25443-0425**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: \_\_\_\_\_  
 Is the claim subject to offset?  No  Yes

3.3 Nonpriority creditor's name and mailing address **Law Office of Richard Winters, LLC** **\$1,836.00**  
**127 West Patrick St.**  
**Frederick, MD 21701**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: Legal Services  
 Is the claim subject to offset?  No  Yes

3.4 Nonpriority creditor's name and mailing address **Michael Tauraso o/b/o TR Bakery, Inc.** **\$88,689.00**  
**122 S. Market St.**  
**Frederick, MD 21701**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: Complaint (partially duplicative of claim of Pit Boss MSF, Inc.)  
 Is the claim subject to offset?  No  Yes

3.5 Nonpriority creditor's name and mailing address **Pit Boss MSF Inc.** **\$88,689.00**  
**122 S. Market St.**  
**Frederick, MD 21701**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: Complaint (partially duplicative of claim of Michael Tauraso o/b/o TR Bakery, Inc.)  
 Is the claim subject to offset?  No  Yes

3.6 Nonpriority creditor's name and mailing address **The Visitation Academy Incorporated** **\$8,344.82**  
**Ray Speciale, Treasurer**  
**P.O. Box 75**  
**Frederick, MD 21705**  
 Date(s) debt was incurred \_\_\_\_\_  
 Last 4 digits of account number \_\_\_\_\_  
 As of the petition filing date, the claim is: *Check all that apply.*  
 Contingent  
 Unliquidated  
 Disputed  
 Basis for the claim: \_\_\_\_\_  
 Is the claim subject to offset?  No  Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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Debtor	Name	Case number (if known)	
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	
		Last 4 digits of account number, if any	
4.1	<b>Comus Inn at Sugarloaf Mountain, LLC</b> c/o The Corporation Trust, Inc., R/A 2405 York Road Suite 201 Lutherville Timonium, MD 21093-2264	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	<b>David C. Weaver, Esq.</b> Weaver & Fitzpatrick PA 131 West Patrick St. Frederick, MD 21701	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>David C. Weaver, Esq., Registered Agent</b> Weaver & Fitzpatrick PA 131 West Patrick St. Frederick, MD 21701	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>Nancy D. Greene, Esq.</b> LAND CARROLL & BLAIR PC 524 King St. Alexandria, VA 22314	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	<b>The Visitation Academy, Incorporated</b> c/o Cindy L. Cantrel, Resident Agent 200 East Second Street Frederick, MD 21701	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	<b>TR Bakery, Inc.</b> c/o Michael Tauraso, Reg Agent 101 North Market Street Frederick, MD 21701	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain _____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ <u>4,729.25</u>
5b. Total claims from Part 2	5b. + \$ <u>508,721.00</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>513,450.25</u>

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206G**

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* *Property*  
 (Official Form 206A/B).

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest **Office space - \$2,425.50 per month ending: 10/31/2019**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**333 West Patrick St., LLC  
 333 West Patrick St.  
 Frederick, MD 21701**

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	Heather Brady Sinnott	550 Jasontown Rd. Westminster, MD 21158	Comus Inn at Sugarloaf Mountain, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.1</u> <input type="checkbox"/> G _____
2.2	Heather Brady Sinnott	550 Jasontown Rd. Westminster, MD 21158	Michael Tauraso o/b/o TR Bakery, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.4</u> <input type="checkbox"/> G _____
2.3	Heather Brady Sinnott	550 Jasontown Rd. Westminster, MD 21158	Pit Boss MSF Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
2.4	Heather Brady Sinnott	550 Jasontown Rd. Westminster, MD 21158	Diane E. Ferren	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
2.5	Heather Brady Sinnott	550 Jasontown Rd. Westminster, MD 21158	The Visitation Academy Incorporated	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____

Debtor Linton Shafer Computer Services, Inc.

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6 **Quniton L. Sinnott**      **550 Jasontown Rd. Westminster, MD 21158**      **Comus Inn at Sugarloaf Mountain, LLC**       D \_\_\_\_\_  
 E/F 3.1  
 G \_\_\_\_\_

2.7 **Quniton L. Sinnott**      **550 Jasontown Rd. Westminster, MD 21158**      **Michael Tauraso o/b/o TR Bakery, Inc.**       D \_\_\_\_\_  
 E/F 3.4  
 G \_\_\_\_\_

2.8 **Quniton L. Sinnott**      **550 Jasontown Rd. Westminster, MD 21158**      **Pit Boss MSF Inc.**       D \_\_\_\_\_  
 E/F 3.5  
 G \_\_\_\_\_

2.9 **Quniton L. Sinnott**      **550 Jasontown Rd. Westminster, MD 21158**      **Diane E. Ferren**       D \_\_\_\_\_  
 E/F 3.2  
 G \_\_\_\_\_

2.10 **Quniton L. Sinnott**      **550 Jasontown Rd. Westminster, MD 21158**      **The Visitation Academy Incorporated**       D \_\_\_\_\_  
 E/F 3.6  
 G \_\_\_\_\_

**Fill in this information to identify the case:**

Debtor name Linton Shafer Computer Services, Inc.

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

For prior year:  
From 11/01/2016 to Filing Date

Operating a business  
 Other \_\_\_\_\_

\$401,983.16

For year before that:  
From 11/01/2015 to 10/31/2016

Operating a business  
 Other \_\_\_\_\_

\$475,035.86

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer  
Check all that apply

3.1. Law Office of Richard Winters, LLC  
127 West Patrick St.  
Frederick, MD 21701

9/18/17 - \$5,770.00  
8/20/17 - \$8,965.00  
8/9/17 - \$3,500.00

\$18,235.00

Secured debt  
 Unsecured loan repayments  
 Suppliers or vendors  
 Services  
 Other\_\_

Debtor **Linton Shafer Computer Services, Inc.**

Case number (if known)

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.2. 333 West Patrick St., LLC	10/3/17 - \$2,425.00 9/1/17 - \$2,425.00 8/1/17 - \$4,025.50	\$8,875.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>Rent &amp; utilities</b>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. The Comus Inn at SugarLoaf Mountain, LLC vs Linton Shafer Computer Services, Inc. 432192V	Complaint	Circuit Court of Montgomery County, MD	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Pit Boss MSF Inc., et. al vs. Linton Shafer Computer Services, Inc. 10C17001447	Complaint	Circuit Court for Frederick County, MD	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor Linton Shafer Computer Services, Inc. Case number (if known) \_\_\_\_\_

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.3.	Comus Inn at Sugarloaf Mountain LLC vs Linton Shafer Computer Services, Inc. 06C17073456	Lis Pendens	Circuit Court for Carroll County, MD	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. McNamee Hosea 6411 Ivy Lane - Ste. 200 Greenbelt, MD 20770	Retainer: \$13,283.00 Filing fee: \$1,717.00		\$15,000.00
Email or website address			
Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Debtor **Linton Shafer Computer Services, Inc.**

Case number (if known) \_\_\_\_\_

Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
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**Part 8: Health Care Bankruptcies**

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:  
 - diagnosing or treating injury, deformity, or disease, or  
 - providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.  
 Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

No.  
 Yes. State the nature of the information collected and retained.

**Banking information, personal information of clients & employees**

Does the debtor have a privacy policy about that information?

No  
 Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

No Go to Part 10.  
 Yes. Fill in below:

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Linton Shafer Computer Services, Inc.**

Case number (if known) \_\_\_\_\_

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

 None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

 None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None
**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**
 No.

 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

Debtor **Linton Shafer Computer Services, Inc.**

Case number (if known) \_\_\_\_\_

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name address	Describe the nature of the business	Employer Identification number <small>Do not include Social Security number or ITIN.</small>	Dates business existed
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**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- None

Name and address	Date of service From-To
26a.1. <b>Linton Shafer Computer Services, Inc. Debtor maintains books &amp; records in house</b>	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- None

Name and address	If any books of account and records are unavailable, explain why
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26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

- None

Name and address
26d.1. <b>Law Office of Richard Winters, LLC 127 West Patrick St. Frederick, MD 21701</b>
26d.2. <b>McNamee Hosea 6411 Ivy Lane - Ste. 200 Greenbelt, MD 20770</b>

**27. Inventories**

Debtor **Linton Shafer Computer Services, Inc.**

Case number (if known) \_\_\_\_\_

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- No
- Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Barbara Brewster	8327 Reno Monument Rd. Middletown, MD 21769	President	32,500 of 35,000 shares
Linda Minnick	2606 Bennies Hill Rd. Middletown, MD 21769-6813		500 shares of 35,000
Todd Rudesill	10420 Harmony Rd. Myersville, MD 21773		500 shares of 35,000
Denise Gouker	8223 Old Hagerstown Rd. Middletown, MD 21769	Secretary/Treasurer	1,500 shares of 35,000

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- No
- Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- No
- Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Barbara A. Brewster 8327 Reno Monument Rd. Middletown, MD 21769	\$85,384.70	October 10, 2016 thru October 10, 2017	Salary
Relationship to debtor	President & Shareholder		

Debtor Linton Shafer Computer Services, Inc.

Case number (if known) \_\_\_\_\_

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.2	Denise S. Gouker 8223 Old Hagerstown Rd. Middletown, MD 21769	\$63,104.80	October 10, 2016 thru October 10, 2017	Salary
	Relationship to debtor <u>Sec/Treas. and Shareholder</u>			
30.3	Kathleen Tara Richards 4526 Timberly Dr. Jefferson, MD 21755	\$54,483.50	October 10, 2016 thru October 10, 2017	Salary
	Relationship to debtor <u>Daughter of Barbara Brewster</u>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
- Yes. Identify below.

Name of the parent corporation \_\_\_\_\_ Employer Identification number of the parent corporation \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
- Yes. Identify below.

Name of the parent corporation \_\_\_\_\_ Employer Identification number of the parent corporation \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 10, 2017

/s/ Barbara A. Brewster  
Signature of individual signing on behalf of the debtor

Barbara A. Brewster  
Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207)* attached?

- No
- Yes

**United States Bankruptcy Court  
District of Maryland**

In re Linton Shafer Computer Services, Inc.

Debtor(s)

Case No.

Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Barbara A. Brewster 8327 Reno Monument Rd. Middletown, MD 21769</b>		<b>32,500 shares of 35,000 shares</b>	<b>Stock</b>
<b>Denise Gouker 3223 Old Hagerstown Rd. Middletown, MD 21769</b>		<b>1,500 shares of 35,000 shares</b>	<b>Stock</b>
<b>Linda Minnick 2606 Bennies Hill Rd. Middletown, MD 21769-6813</b>		<b>500 shares of 35,000</b>	<b>Stock</b>
<b>Todd Rudesill 10420 Harmony Rd. Myersville, MD 21773</b>		<b>500 shares of 35,000 shares</b>	<b>Stock</b>

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF 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 of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date October 10, 2017Signature /s/ Barbara A. Brewster  
Barbara A. Brewster

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

**United States Bankruptcy Court  
District of Maryland**

In re Linton Shafer Computer Services, Inc.

Debtor(s)

Case No.

Chapter

11

**VERIFICATION OF CREDITOR MATRIX**

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: October 10, 2017

/s/ Barbara A. Brewster

**Barbara A. Brewster/President**

Signer/Title

Comus Inn at Sugarloaf Mountain, LLC  
23900 Old Hundred Rd.  
Dickerson, MD 20842

Comus Inn at Sugarloaf Mountain, LLC  
c/o The Corporation Trust, Inc., R/A  
2405 York Road  
Suite 201  
Lutherville Timonium, MD 21093-2264

David C. Weaver, Esq.  
Weaver & Fitzpatrick PA  
131 West Patrick St.  
Frederick, MD 21701

David C. Weaver, Esq., Registered Agent  
Weaver & Fitzpatrick PA  
131 West Patrick St.  
Frederick, MD 21701

Denise S. Gouker  
8223 Old Hagerstown Rd.  
Middletown, MD 21769

Diane E. Ferren  
t/a Sky's the Limit  
P.O. Box 425  
Shepherdstown, WV 25443-0425

DLLR State of Maryland  
Ofc of Unemployment Ins. Contr. Div.  
1100 North Eutaw St., Room 401  
Baltimore, MD 21201

Emily Carroll  
11 Holder Ct.  
Boonsboro, MD 21713

Internal Revenue Service  
Centralized Insolvency Operation  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Kathleen Tara Richards  
4526 Timbery Dr.  
Jefferson, MD 21755

Law Office of Richard Winters, LLC  
127 West Patrick St.  
Frederick, MD 21701

Lynn A. Drummond  
1904 Antero Ct.  
Frederick, MD 21702

Michael Tauraso o/b/o TR Bakery, Inc.  
122 S. Market St.  
Frederick, MD 21701

Nancy D. Greene, Esq.  
LAND CARROLL & BLAIR PC  
524 King St.  
Alexandria, VA 22314

Pit Boss MSF Inc.  
122 S. Market St.  
Frederick, MD 21701

Teresa W. Plumley  
1719 Greenfield Rd.  
Adamstown, MD 21710

The Visitation Academy Incorporated  
Ray Speciale, Treasurer  
P.O. Box 75  
Frederick, MD 21705

The Visitation Academy, Incorporated  
c/o Cindy L. Cantrel, Resident Agent  
200 East Second Street  
Frederick, MD 21701

Tiffany Harris  
128 N. Main St.  
Union Bridge, MD 21791

TR Bakery, Inc.  
c/o Michael Tauraso, Reg Agent  
101 North Market Street  
Frederick, MD 21701

Vanguard  
P.O. Box 1110  
Valley Forge, PA 19482-1110

**United States Bankruptcy Court  
District of Maryland**

In re Linton Shafer Computer Services, Inc.

Debtor(s)

Case No.

Chapter 11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Linton Shafer Computer Services, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

**October 10, 2017**

Date

**/s/ Craig M. Palik (cpalik@mhlawyers.com)**

**Craig M. Palik (cpalik@mhlawyers.com)**

Signature of Attorney or Litigant

Counsel for Linton Shafer Computer Services, Inc.

**McNamee Hosea**

**6411 Ivy Lane, Ste. 200**

**Greenbelt, MD 20770**

**(301) 441-2420 Fax:(301) 982-9450**