

United States Bankruptcy Court Western District of Missouri						Voluntary Petition																									
Name of Debtor (if individual, enter Last, First, Middle): Rushing, Sr., Lamond NMN			Name of Joint Debtor (Spouse) (Last, First, Middle): Johnson-Rushing, Patricia Lynn			All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): Pat's Playland, Patricia L. Johnson																						
Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): 8102			Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): 3308			Street Address of Debtor (No. & Street, City, and State): 4104 E. 16th Terrace Kansas City, MO			Street Address of Joint Debtor (No. & Street, City, and State): 4104 E. 16th Terrace Kansas City, MO																						
ZIP CODE 64127			ZIP CODE 64127			County of Residence or of the Principal Place of Business: Jackson			County of Residence or of the Principal Place of Business: Jackson																						
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):			ZIP CODE			ZIP CODE																						
Location of Principal Assets of Business Debtor (if different from street address above): 3714 E. 27th Street, Kansas City, Missouri			ZIP CODE 64127			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:33%;">Type of Debtor (Form of Organization) (Check one box.)</th> <th style="width:33%;">Nature of Business (Check one box)</th> <th style="width:34%;">Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)</th> </tr> <tr> <td style="padding: 5px;"> <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) <hr/> </td> <td style="padding: 5px;"> <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other <hr/> <input type="checkbox"/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.) </td> <td style="padding: 5px;"> <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input checked="" type="checkbox"/> Debts are primarily business debts. </td> </tr> </table>			Type of Debtor (Form of Organization) (Check one box.)	Nature of Business (Check one box)	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)	<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) <hr/>	<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other <hr/> <input type="checkbox"/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.)	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.																	
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Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b) See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.						Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																									
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									THIS SPACE IS FOR COURT USE ONLY																						
Estimated Number of Creditors <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">1-49</td> <td style="text-align: center;">50-99</td> <td style="text-align: center;">100-199</td> <td style="text-align: center;">200-999</td> <td style="text-align: center;">1,000-5,000</td> <td style="text-align: center;">5,001-10,000</td> <td style="text-align: center;">10,001-25,000</td> <td style="text-align: center;">25,001-50,000</td> <td style="text-align: center;">50,001-100,000</td> <td style="text-align: center;">Over 100,000</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>												1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Lamond NMN Rushing, Sr., Patricia Lynn Johnson-Rushing	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: Western District of Missouri	Case Number: 03-45254	Date Filed: 08/20/2003	
Location Where Filed: Western District of Missouri	Case Number: 04-42394	Date Filed: 04/20/2004	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: NONE	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<p style="text-align: center;">Exhibit A</p> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)	<p style="text-align: center;">Exhibit B</p> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).		
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.	<p style="text-align: center;">X Not Applicable 7/6/2007</p> Signature of Attorney for Debtor(s) Date Gregory M. Garvin MO#38460		
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.			
<input checked="" type="checkbox"/> No			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following).			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Lamond NMN Rushing, Sr., Patricia Lynn Johnson-Rushing
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Signatures

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

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

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

s/ Lamond NMN Rushing, Sr.
 Signature of Debtor **Lamond NMN Rushing, Sr.**

s/ Patricia Lynn Johnson-Rushing
 Signature of Joint Debtor **Patricia Lynn Johnson-Rushing**

 Telephone Number (If not represented by attorney)
7/6/2007
 Date

Signature of a Foreign Representative

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

(Check only **one** box.)

I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.

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

Not Applicable
 (Signature of Foreign Representative)

 (Printed Name of Foreign Representative)

 Date

Signature of Attorney

/s/ Gregory M. Garvin
 Signature of Attorney for Debtor(s)

Gregory M. Garvin, MO#38460
 Printed Name of Attorney for Debtor(s) / Bar No.

Sader & Garvin LLC
 Firm Name

4739 Belleview Avenue, Suite 300 Kansas City MO 64112-1364
 Address

 Telephone Number **816-561-1818** **816-561-0818**

7/6/2007 **ggarvin@sadergarvin.com**
 Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Not Applicable
 Printed Name and title, if any, of Bankruptcy Petition Preparer

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

 Address

Signature of Debtor (Corporation/Partnership)

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

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

Not Applicable
 Signature of Authorized Individual

 Printed Name of Authorized Individual

 Title of Authorized Individual

 Date

Not Applicable

 Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

PRIOR BANKRUPTCY CASE FILED WITHIN LAST 8 YEARS

Location Where Filed	Case Number	Date Filed
Western District of Missouri	05-72098	12/20/2005

UNITED STATES BANKRUPTCY COURT
Western District of Missouri

In re: **Lamond NMN Rushing, Sr. Patricia Lynn
Johnson-Rushing**
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the **180 days before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] _____*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Official Form 1, Exh. D (10/06) – Cont.

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. ' 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: **s/ Lamond NMN Rushing, Sr.**

_____ **Lamond NMN Rushing, Sr.**

Date: **7/6/2007**

UNITED STATES BANKRUPTCY COURT
Western District of Missouri

In re: Lamond NMN Rushing, Sr. Patricia Lynn
Johnson-Rushing
Debtor(s)

Case No. _____
(if known)

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2. Within the **180 days before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] _____*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Official Form 1, Exh. D (10/06) – Cont.

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. ' 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: **s/ Patricia Lynn Johnson-Rushing**
Patricia Lynn Johnson-Rushing

Date: **7/6/2007**

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI

IN RE:)	
)	
Lamond NMN Rushing, Sr.)	
)	
Patricia Lynn Johnson-Rushing)	Case No.
)	
Debtor(s))	
)	

VERIFICATION OF MAILING MATRIX

The above-named Debtor(s) hereby verifies that the attached list of creditors is true and correct to the best of my knowledge and includes the name and address of my ex-spouse (if any).

Date: 7/6/2007

s/ Lamond NMN Rushing, Sr.
Lamond NMN Rushing, Sr.
 Signature of Debtor

s/ Patricia Lynn Johnson-Rushing
Patricia Lynn Johnson-Rushing
 Signature of Joint Debtor

United States Bankruptcy Court
Western District of Missouri

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Sprint Bankruptcy Department 1310 Martin Luther King Drive Bloomington, IL 61701				\$700.00
ADT Secure America 7707 NW 97th Terrace Kansas City, MO 64153				\$12,300.00
Baptist Lutheran Medical Center c/o Patient Accounts 6601 A. Rockhill Road Kansas City, MO 64131				\$1,500.00
Capital One PO Box 85167 Richmond, VA 23285				\$563.44
Children's Mercy Hospital PO Box 804435 Kansas City, MO 64180-4435				\$8,174.27
HDCS-Customer Service PO Box 689100 Des Moines, IA 50368-9100				\$1,000.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
Metro Emergency Physicians PO Box 808 Grand Rapids, MI 49518				\$75.44
Monogram Credit Card PO Box 103047 Roswell, GA 30076				\$5,200.00
Morris Wise 6724 Troost Kansas City, MO 64131				\$26.02
Nuvell Credit Corp. PO Box 242627 Little Rock, AR 72223-0029				\$337.97
St. Luke's Hospital of Kansas City Physician Billing Services 4401 Wornall Road Kansas City, MO 64111				\$86.41
Menorah Medical Center c/o Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285				\$519.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
Chase Home Mortgage 10790 Rancho Bernardo Road PO Box 509011 San Diego, CA 92150-9011				\$51,666.00
				SECURED VALUE: \$150,000.00
Truman Medical Center PO Box 930365 Kansas City, MO 64193-0365				\$550.62
Verizon Wireless Bankruptcy Department PO Box 3397 Bloomington, IL 61702				\$1,352.54
City of Kansas City c/o Mark Rhuems, Revenue Division 414 E. 12th Street, #201W Kansas City, MO 64106				\$22,000.00
MO Dept. of Labor & Industrial MO Div. of Employment Security Attn: Legal Counsel PO Box 59 Jefferson City, MO 65104				\$15,000.00
Jackson County - Manager of Finance Bankruptcy 415 E. 12th Street, Rm 100 Kansas City, MO 64106				\$2,375.18

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Internal Revenue Service Central Insolvency Operations PO Box 21125 Philadelphia, PA 19114				\$348,000.00
Missouri Department of Revenue PO Box 475 Jefferson City, MO 65105				\$25,000.00
GE Consumer Finance For GE Money Bank PO Box 960061 Orlando, FL 32896				\$5,202.62
Nextell Communications PO Box 172408 Denver, CO 80217-2408				\$3,246.35
Ford Motor Credit Drawer 55-953 PO Box 55000 Detroit, MI 48255				\$9,955.00
United Imaging Consultants c/o Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285				\$58.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
St. Luke's Pathology Assoc., PA PO Box 830912 Birmingham, AL 35283-0913				\$45.00
St. Luke Hospital Regional Lab c/o Venture Financial Services, Inc PO Box 16568 6158 Raytown Trafficway Raytown, MO 64133				\$90.25
Truman Medical Center c/o Credit World Services, Inc. 6000 Martway Street Shawnee Mission, KS 66202				\$24.00
Ferns, Matile & Smith, MD, PC 4400 Broadway, Ste. 302 Kansas City, MO 64111				\$47.56
Two Rivers Psychiatric Hospital 5121 Raytown Road Kansas City, MO 64133				\$600.00
Baby and Child Associates LLC PO Box 12345 Kansas City, KS 66112				\$190.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Alliance Radiology, PA PO Box 804451 Kansas City, MO 64180				\$86.00
Plaza Gastroenterology Assoc., LLC 12330 Metcalf, Ste. 260 Overland Park, KS 66213-1302				\$45.26
St. Luke's Health Systems PO Box 803998 Kansas City, MO 64180-3998				\$400.00
Ameripath Akan c/o Lamont, Hanley & Assoc., Inc. 1138 Elm Street PO Box 179 Manchester, NH 03101-1514				\$55.00
Medical Plaza Consultants PC 4320 Wornall, Ste. 530 Kansas City, MO 64111				\$19.21
Research Medical Center c/o NCO Financial Systems, Inc. 1804 Washington Blvd., Dept. 600 Baltimore, MD 21230				\$159.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
St. Luke's Physician Services PO Box 931168 Kansas City, MO 64193				\$80.00
Family Support Division 11 S. Water Liberty, MO 64068				\$21,613.00
GEMB/Dillards PO Box 65005 Phoenix, AZ 85072				\$3,601.00
Mazuma Credit Union 9300 Troost Kansas City, MO 64131				\$806.00
Washington Mutual/Providian PO Box 9007 Pleasanton, CA 94566				\$3,305.00
University Physicians Assoc. c/o Berlin-Wheeler, Inc. 2942-A Wanamaker Dr., Ste. 200 Topeka, KS 66614				\$25.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing, Case No. _____
Debtors Chapter 11

List Of Creditors Holding 20 Largest Unsecured Claims

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Midwest Radiology c/o Executive Financial Consultants 310 Armour Road North Kansas City, MO 64116				\$133.00
Headache and Pain Center PA PO Box 6757 Leawood, KS 66206				\$336.00
Toyota Motor Credit Corp. 5005 N. River Blvd., NE Cedar Rapids, IA 52411				\$11,000.00

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

**United States Bankruptcy Court
Western District of Missouri**

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing,
Debtors

Case No. _____

Chapter 11

SUMMARY OF SCHEDULES

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

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 245,000.00		
B - Personal Property	YES	3	\$ 42,135.00		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	2		\$ 263,928.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	4		\$ 433,988.18	
F - Creditors Holding Unsecured Nonpriority Claims	YES	12		\$ 71,894.96	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 39,163.86
J - Current Expenditures of Individual Debtor(s)	YES	2			\$ 32,186.00
TOTAL		29	\$ 287,135.00	\$ 769,811.14	

**United States Bankruptcy Court
Western District of Missouri**

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 21,613.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	\$ 412,375.18
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E.	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 433,988.18

State the following:

Average Income (from Schedule I, Line 16)	\$ 75,663.86
Average Expenses (from Schedule J, Line 18)	\$ 32,186.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 16,765.50

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$51,666.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 21,613.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$412,375.18
4. Total from Schedule F		\$71,894.96
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$535,936.14

In re: Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
2511 Denver Kansas City, MO 64127 (Mother's Residence)			\$ 45,000.00	\$ 44,262.00
2535 Denver Kansas City, MO 64127 (Rental)			\$ 20,000.00	\$ 18,000.00
3714 E. 27th Street Kansas City, MO 64126 (Business Property)			\$ 30,000.00	\$ 0.00
4104 E. 16th Terrace Kansas City, MO 64127 (Residence)			\$ 150,000.00	\$ 201,666.00
Total			\$ 245,000.00	

(Report also on Summary of Schedules.)

In re Lamond NMN Rushing, Sr. Patricia Lynn
Johnson-Rushing Debtors

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand		Cash		35.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		US Bank Checking Account for Pat's Playland (alone)		400.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods and Furnishings		1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing		500.00
7. Furs and jewelry.		Jewelry		200.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give Particulars.	X			

In re Lamond NMN Rushing, Sr. Patricia Lynn
Johnson-Rushing Debtors

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		State of Missouri (approx.)		35,000.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Claim of Patricia Johnson-Rushing against Victoria's Secret, Independence, MO Police Dept., Simon Property Group; False arrest, false imprisonment, etc.		Unknown
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

In re Lamond NMN Rushing, Sr. Patricia Lynn
Johnson-Rushing Debtors

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1989 Jaguar (not running)		3,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.		Office Equipment/Playground Equipment		1,500.00
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
<u>2</u> continuation sheets attached			Total >	\$ 42,135.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
 (Check one box)

Check if debtor claims a homestead exemption that exceeds
 \$136,875

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

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
1989 Jaguar (not running)	RSMo § 513.430(5)	3,000.00	3,000.00
Cash	RSMo § 513.430(3)	35.00	35.00
Clothing	RSMo § 513.430(1)	500.00	500.00
Household Goods and Furnishings	RSMo § 513.430(1)	1,500.00	1,500.00
Jewelry	RSMo § 513.430(1)	200.00	200.00
Office Equipment/Playground Equipment	RSMo § 513.430(4)	1,500.00	1,500.00
US Bank Checking Account for Pat's Playland (alone)	RSMo § 513.430(3)	400.00	400.00

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
 (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBETOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0016396129 Chase Home Mortgage 10790 Rancho Bernardo Road PO Box 509011 San Diego, CA 92150-9011 MTG Electronic Reg Systems Inc. c/o Chase Home Finance LLC CA 3415 Vision Dr., Dept. OH47142 Columbus, OH 43219			01/01/2002 Mortgage 4104 E. 16th Terrace Kansas City, MO 64127 (Residence) VALUE \$150,000.00				201,666.00	51,666.00
ACCOUNT NO. Commerce Mortgage PO Box 26648 Kansas City, MO 64127 Commerce Bank 922 Walnut Kansas City, MO 64106			01/01/1994 2535 Denver Kansas City, MO 64127 (Rental) VALUE \$20,000.00				18,000.00	0.00

1 continuation sheets attached

Subtotal >
 (Total of this page)

 Total >
 (Use only on last page)

\$ 219,666.00	\$ 51,666.00
\$	\$

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
 (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. Select Portfolio Services PO Box 551170 Jacksonville, FL 32255 Select Portfolio Servicing Inc. EQCC Home Equity Loan Trust SE PO Box 65450 Salt Lake City, UT 84165 Select Portfolio Servicing Inc. 10401 Deerwood Park Jacksonville, FL 32256 Select Portfolio Servicing Inc. 1270 Northland Drive, Ste. 200 Mendota Heights, MN 55120			2511 Denver Kansas City, MO 64127 (Mother's Residence) _____ VALUE \$45,000.00				44,262.00	0.00

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal >
(Total of this page)

Total >
(Use only on last page)

\$	44,262.00	\$	0.00
\$	263,928.00	\$	51,666.00

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing

Debtors

Case No. _____

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

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

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

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

Type of Priority: Domestic Support Obligations

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. Family Support Division 11 S. Water Liberty, MO 64068 Family Support Division PO Box 109064 Jefferson City, MO 65110							21,613.00	21,613.00	0.00

Subtotals >
(Totals of this page)

Total >

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

Total >

(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 21,613.00	\$ 21,613.00	\$ 0.00
\$		
	\$	\$

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

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

Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. City of Kansas City c/o Mark Rhuems, Revenue Division 414 E. 12th Street, #201W Kansas City, MO 64106			02/21/2006				22,000.00	Unknown	0.00
ACCOUNT NO. Internal Revenue Service Central Insolvency Operations PO Box 21125 Philadelphia, PA 19114 U.S. Attorney Room 5510, U.S. Courthouse 400 E. 9th Street Kansas City, MO 64106 Internal Revenue Service Associate Area Counsel SB/SE Area 2345 Grand Blvd., Ste. 301 Kansas City, MO 64108-2600			04/14/2006 98,000.00 personal 250,000.00 941's				348,000.00	Unknown	0.00
ACCOUNT NO. Jackson County - Manager of Finance Bankruptcy 415 E. 12th Street, Rm 100 Kansas City, MO 64106 Jackson County-Manager of Finance PO Box 219747 Kansas City, MO 64121-9747			06/07/2006				2,375.18	Unknown	0.00
ACCOUNT NO. Missouri Department of Revenue PO Box 475 Jefferson City, MO 65105 Missouri Department of Revenue 615 E. 13th Street, Ste. 504 Kansas City, MO 64106			05/09/2006				25,000.00	Unknown	0.00

Sheet no. 2 of 3 continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals >
(Totals of this page)

Total >

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

Total >

(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 397,375.18	\$ 0.00	\$ 0.00
\$		
	\$	\$

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. MO Dept. of Labor & Industrial MO Div. of Employment Security Attn: Legal Counsel PO Box 59 Jefferson City, MO 65104			04/24/2006				15,000.00	Unknown	0.00

Subtotals >
(Totals of this page)

	\$ 15,000.00	\$ 0.00	\$ 0.00
Total >	\$ 433,988.18		
Total >		\$ 21,613.00	\$ 0.00

(Use only on last page of the completed
Schedule E. Report also on the Summary of
Schedules.)

(Use only on last page of the completed
Schedule E. If applicable, report also on the
Statistical Summary of Certain Liabilities
and Related Data.)

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						12,300.00
ADT Secure America 7707 NW 97th Terrace Kansas City, MO 64153		2003-2004 Security System				
ACCOUNT NO. L0700801165		06/15/2007				86.00
Alliance Radiology, PA PO Box 804451 Kansas City, MO 64180						
Alliance Radiology, PA PO Box 809012 Kansas City, MO 64180-9012						
Alliance Radiology, PA c/o Optima Recovery Services 6215 Kingston Pike, Ste. A Knoxville, TN 37919						
Alliance Radiology, PA c/o Optima Recovery Services PO Box 52968 Knoxville, TN 37950						
ACCOUNT NO. 6517949		08/29/2006				55.00
Ameripath Akan c/o Lamont, Hanley & Assoc., Inc. 1138 Elm Street PO Box 179 Manchester, NH 03101-1514						

11 Continuation sheets attached

Subtotal >	\$	12,441.00
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3581 Baby and Child Associates LLC PO Box 12345 Kansas City, KS 66112 Baby and Child Associates LLC 6650 Troost Kansas City, MO 64131			12/15/2005				190.00
ACCOUNT NO. Baptist Lutheran Medical Center c/o Patient Accounts 6601 A. Rockhill Road Kansas City, MO 64131			2003 Medical Bills				1,500.00
ACCOUNT NO. 479124185350 Capital One PO Box 85167 Richmond, VA 23285 Capital One Bank PO Box 85520 Richmond, VA 23285 Capital One Bank PO Box 85015 Richmond, VA 23285-5075 Capital One Bank 11013 W. Broad Street Glen Allen, VA 23060		C	01/01/2001 2003 credit card purchases				563.44

Sheet no. 1 of 11 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal >	\$	2,253.44
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxx-xx-8102 Children's Mercy Hospital PO Box 804435 Kansas City, MO 64180-4435 Children's Mercy Hospital c/o Healthcare Financial Associates PO Box 803302 Kansas City, MO 64180-3302 Children's Mercy Hospital 2401 Gillham Road Kansas City, MO 64108			06/01/2007 2003-2005 Medical bills				8,174.27
ACCOUNT NO. 32704 Ferns, Matile & Smith, MD, PC 4400 Broadway, Ste. 302 Kansas City, MO 64111			05/29/2007				47.56
ACCOUNT NO. 480630000000000006035648 Ford Motor Credit Drawer 55-953 PO Box 55000 Detroit, MI 48255 Ford Motor Credit Company PO Box 6508 Mesa, AZ 85216-6508 Ford Motor Credit Company PO Box 542000 Omahan, NE 68154 Ford Motor Credit c/o National Bankruptcy Department PO Box 537901 Livonia, MI 48153-7901			01/17/2006				9,955.00

Sheet no. 2 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$ 18,176.83
Total >	\$

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. GE Consumer Finance For GE Money Bank PO Box 960061 Orlando, FL 32896 GEMB PO Box 6150 Rapid City, SD 57709 GE Money Bank 4246 South Riverboat Salt Lake City, UT 84123 GEMB 1400 Turbine Drive, Ste. 100 Rapid City, SD 57703			03/02/2006				5,202.62
ACCOUNT NO. 6045870419402508 GEMB/Dillard's PO Box 65005 Phoenix, AZ 85072 GEMB PO Box 6150 Rapid City, SD 57709 GE Money Bank 4246 South Riverboat Salt Lake City, UT 84123 GEMB 1400 Turbine Dr., Ste. 100 Rapid City, SD 57703			07/01/1984				3,601.00

Sheet no. 3 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	8,803.62
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			2003 Credit Card Purchases				1,000.00
HDCS-Customer Service PO Box 689100 Des Moines, IA 50368-9100							
ACCOUNT NO.			04/18/2007				336.00
Headache and Pain Center PA PO Box 6757 Leawood, KS 66206 Headache and Pain Center 11200 Tomahawk Creek Parkway Leawood, KS 66211							
ACCOUNT NO. 1106240506			11/1/96				806.00
Mazuma Credit Union 9300 Troost Kansas City, MO 64131							
ACCOUNT NO. 1161384			05/04/2007				19.21
Medical Plaza Consultants PC 4320 Wornall, Ste. 530 Kansas City, MO 64111							

Sheet no. 4 of 11 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal >	\$	2,161.21
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1373133318376 Menorah Medical Center c/o Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285 Menorah Medical Center 5721 W. 119th Street Overland Park, KS 66209			01/01/2003				519.00
ACCOUNT NO. Metro Emergency Physicians PO Box 808 Grand Rapids, MI 49518			2005 Medical Bills				75.44
ACCOUNT NO. 462203 Midwest Radiology c/o Executive Financial Consultants 310 Armour Road North Kansas City, MO 64116			11/01/2001				133.00
ACCOUNT NO. Monogram Credit Card PO Box 103047 Roswell, GA 30076			2004 credit card purchases				5,200.00
ACCOUNT NO. Morris Wise 6724 Troost Kansas City, MO 64131			4/2005 Medical bills				26.02

Sheet no. 5 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	5,953.46
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							3,246.35
Nextell Communications PO Box 172408 Denver, CO 80217-2408			2003 phone arrears				
ACCOUNT NO.							337.97
Nuvell Credit Corp. PO Box 242627 Little Rock, AR 72223-0029			1995 repossessed vehicle				
Nuvell Credit Company LLC c/o Nuvell Financial Svcs PO Box 7100 Little Rock, AR 72223							
ACCOUNT NO. 13427			12/29/2006				45.26
Plaza Gastroenterology Assoc., LLC 12330 Metcalf, Ste. 260 Overland Park, KS 66213-1302							
ACCOUNT NO.			01/09/2006				0.00
Rean Johnson 2511 Denver Kansas City, MO 64127							

Sheet no. 6 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	3,629.58
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 97275277073 Research Medical Center c/o NCO Financial Systems, Inc. 1804 Washington Blvd., Dept. 600 Baltimore, MD 21230 Research Medical Center c/o NCO Financial Systems, Inc. PO Box 15273 Wilmington, DE 19850 Research Medical Center c/o Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285 Research Medical Center 2316 E. Meyer Blvd. Kansas City, MO 64132			10/10/2007				159.00
ACCOUNT NO. Robert & Helen Mead PO Box 307 Cabool, MO 65689 Robert & Helen Mead c/o Ronald Byers 304 Walnut #210 Independence, MO 64050							0.00
ACCOUNT NO. Sprint Bankruptcy Department 1310 Martin Luther King Drive Bloomington, IL 61701 Sprint PO Box 172408 Denver, CO 80217			2002-2004 phone arrears				700.00

Sheet no. 7 of 11 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal >	\$	859.00
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 941-ZCS1140027 St. Luke Hospital Regional Lab c/o Venture Financial Services, Inc PO Box 16568 6158 Raytown Trafficway Raytown, MO 64133 St. Luke's Regional Laboratories PO Box 219137 Kansas City, MO 64121 St. Luke's Regional Laboratories 4320 Wornall, Ste. 616 Kansas City, MO 64111			10/27/2005				90.25
ACCOUNT NO. St. Luke's Health Systems PO Box 803998 Kansas City, MO 64180-3998 St. Luke's Hospital 4401 Wornall Road Kansas City, MO 64111			2005 Medical bills				400.00
ACCOUNT NO. 128-351-4 00000517270 St. Luke's Hospital of Kansas City Physician Billing Services 4401 Wornall Road Kansas City, MO 64111 Saint Luke's Hospital Physician Billing Services PO Box 504407 St. Louis, MO 63150-4407			06/13/2007				86.41

Sheet no. 8 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	576.66
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. US84 06055056 St. Luke's Pathology Assoc., PA PO Box 830912 Birmingham, AL 35283-0913 St. Luke's Pathology Assoc., PA PO Box 219781 Kansas City, MO 64121-9781 St. Luke's Pathology Assoc. PA 4401 Wornall Road Kansas City, MO 64111			10/21/2005				45.00
ACCOUNT NO. PSY2535 St. Luke's Physician Services PO Box 931168 Kansas City, MO 64193 St. Luke's Physician Services 4401 Wornall Kansas City, MO 64111			06/13/2007				80.00
ACCOUNT NO. 70400560912660001 Toyota Motor Credit Corp. 5005 N. River Blvd., NE Cedar Rapids, IA 52411 Toyota Motor Credit Corporation PO Box 5236 Carol Stream, IL 60197-5236 Toyota Motor Credit Corporation 8101 College Blvd. Overland Park, KS 66210			01/19/2006				11,000.00

Sheet no. 9 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	11,125.00
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. W0701500905 Truman Medical Center PO Box 930365 Kansas City, MO 64193-0365 Truman Medical Center Hospital Hill PO Box 930498 Kansas City, MO 64193-0498 Truman Medical Center c/o Credit World Services, Inc. 6000 Martway Street Shawnee Mission, KS 66202			06/15/2007 1999-2005 Medical Bills				550.62
ACCOUNT NO. 01009800448 Truman Medical Center c/o Credit World Services, Inc. 6000 Martway Street Shawnee Mission, KS 66202 Truman Medical Center 2301 Holmes Kansas City, MO 64108			09/13/2005				24.00
ACCOUNT NO. 291550010 Two Rivers Psychiatric Hospital 5121 Raytown Road Kansas City, MO 64133			01/08/2007				600.00

Sheet no. 10 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	1,174.62
Total >	\$	

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

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1373133168376 United Imaging Consultants c/o Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285 United Imaging Consultants 5800 Foxridge Drive, Ste.240 Overland Park, KS 66202			02/01/2002				58.00
ACCOUNT NO. 121864086 University Physicians Assoc. c/o Berlin-Wheeler, Inc. 2942-A Wanamaker Dr., Ste. 200 Topeka, KS 66614 University Physician Associates 2310 Holmes Kansas City, MO 64108			08/01/2006				25.00
ACCOUNT NO. Verizon Wireless Bankruptcy Department PO Box 3397 Bloomington, IL 61702 Verizon Wireless c/o Dunsdemand 340 Interstate N. Parkway PO Box 723001 Atlanta, GA 31139-0001			2005 phone arrears				1,352.54
ACCOUNT NO. 0700690249 Washington Mutual/Providian PO Box 9007 Pleasanton, CA 94566			11/01/1996				3,305.00

Sheet no. 11 of 11 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

Subtotal >	\$	4,740.54
Total >	\$	71,894.96

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

In re: Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing,
Debtors

Case No. _____
(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

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

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re: Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

SCHEDULE H - CODEBTORS

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
------------------------------	------------------------------

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
 Debtors

Case No. _____
 (If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
	Son	3
	Daughter	11
	Son	11
	Daughter (Husband's)	16
	Daughter	17
Employment:	DEBTOR	SPOUSE
Occupation	Maintenance	Owner
Name of Employer	Grace & Holy Trinity Cathedral	Pat's Playland
How long employed	4.5 years	10 Years
Address of Employer	415 W. 13th Street Kansas City, MO 64105	3714 E. 27th Street Kansas City, MO 64127

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>2,532.50</u>	\$ <u>0.00</u>
2. Estimate monthly overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
3. SUBTOTAL	\$ <u>2,532.50</u>	\$ <u>0.00</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>402.00</u>	\$ <u>0.00</u>
b. Insurance	\$ <u>56.64</u>	\$ <u>0.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify) Child Support	\$ <u>410.00</u>	\$ <u>0.00</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>868.64</u>	\$ <u>0.00</u>
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>1,663.86</u>	\$ <u>0.00</u>
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ <u>0.00</u>	\$ <u>37,500.00</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
11. Social security or other government assistance (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
13. Other monthly income (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ <u>0.00</u>	\$ <u>37,500.00</u>
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ <u>1,663.86</u>	\$ <u>37,500.00</u>
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ <u>39,163.86</u>	

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

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

NONE

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing,
Debtors

Case No. _____
(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,671.00</u>
a. Are real estate taxes included? Yes _____ No <u>✓</u>		
b. Is property insurance included? Yes _____ No <u>✓</u>		
2. Utilities: a. Electricity and heating fuel	\$	<u>350.00</u>
b. Water and sewer	\$	<u>50.00</u>
c. Telephone	\$	<u>50.00</u>
d. Other _____	\$	<u>0.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>100.00</u>
4. Food	\$	<u>750.00</u>
5. Clothing	\$	<u>250.00</u>
6. Laundry and dry cleaning	\$	<u>50.00</u>
7. Medical and dental expenses	\$	<u>200.00</u>
8. Transportation (not including car payments)	\$	<u>400.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>25.00</u>
10. Charitable contributions	\$	<u>1,000.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>200.00</u>
b. Life	\$	<u>100.00</u>
c. Health	\$	<u>0.00</u>
d. Auto	\$	<u>0.00</u>
e. Other _____	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <u>Personal Property Tax Real Estate</u>	\$	<u>70.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>0.00</u>
b. Other _____	\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>26,370.00</u>
17. Other <u>Haircuts</u>	\$	<u>250.00</u>
<u>Misc./Toiletries/Paper Products</u>	\$	<u>300.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	<u>32,186.00</u>

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>39,163.86</u>
b. Average monthly expenses from Line 18 above	\$	<u>32,186.00</u>
c. Monthly net income (a. minus b.)	\$	<u>6,977.86</u>

In re Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 31 sheets (*total shown on summary page plus 2*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: 7/6/2007

Signature: s/ Lamond NMN Rushing, Sr.
Lamond NMN Rushing, Sr.
Debtor

Date: 7/6/2007

Signature: s/ Patricia Lynn Johnson-Rushing
Patricia Lynn Johnson-Rushing
(Joint Debtor, if any)

[If joint case, both spouses must sign]

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

(NOT APPLICABLE)

UNITED STATES BANKRUPTCY COURT
Western District of Missouri

In re: Lamond NMN Rushing, Sr. Patricia Lynn Johnson-Rushing
Debtors

Case No. _____
(If known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
26,542.00	Wages (Lamond)	2005
	Wages (Patricia)	2005
27,753.00	Wages (Lamond)	2006
	Wages (Patricia)	2006
223,401.00	Wages (Patricia)	Year-to-date
15,195.00	Wages (Lamond)	Year-to-date

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
--------	--------	--------------------

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None



a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
------------------------------	-------------------	-------------	--------------------

None



b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------	-----------------------------------	--------------------

None



c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
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Rushing v. Victoria's Secret, et al.	Injury to rights	Jackson County, Missouri	Pending
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04CV23243

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
Missouri Department of Labor and Industrial Relations	04/01/2007	\$6,325.31

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Ford Motor Credit	02/01/2007	2001 Ford F-150 \$10,000.00
Toyota Motor Credit	02/01/2007	1998 Lexus 470 \$15,000.00

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

NAME AND ADDRESS OF CUSTODIAN	NAME AND ADDRESS OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

- None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
Faith Worship Family Center			Tithing Approx. \$18,000.00

8. Losses

- None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
Jaguar	Niece driving- accident	

9. Payments related to debt counseling or bankruptcy

- None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Sader & Garvin LLC	6/7/07	\$1,000.00
4739 Belleview Avenue, Suite 300	6/22/07	\$6,700.00
Kansas City MO 64112-1364	7/06/07	\$1,039.00

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Chase Home Mortgage to cover mortgage arrears 3/4/5/2007		\$28,000.00

None



b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
Grandmother	VW Cabrio	Residence (Debtors borrowing vehicle)
Mother	Van	Residence (Debtors borrowing van)

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18. Nature, location and name of business

None



a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Pat's Playland	43-1800984/xxx-xx-	3714 E. 27th Street Kansas City, MO 64127-4442	Daycare	01/01/1997

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME	ADDRESS
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19. Books, records and financial statements

None



a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
Patricia Rushing 4104 E. 16th Terrace Kansas City, MO 64127	1997 to present

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None

NAME AND ADDRESS

DATES SERVICES RENDERED

Patricia Rushing
4104 E. 16th Terrace
Kansas City, MO 64127

1997 to present

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None

NAME

ADDRESS

Patricia Rushing

4104 E. 16th Terrace
Kansas City, MO 64127

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case by the debtor.

None

NAME AND ADDRESS

DATE ISSUED

Patricia Rushing
4104 E. 16th Terrace
Kansas City, MO 64127

01/01/1997

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN
 OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting securities of the corporation.

None



NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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22. Former partners, officers, directors and shareholders

None



a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

None



NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23. Withdrawals from a partnership or distributions by a corporation

None



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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24. Tax Consolidation Group.

None



If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER
----------------------------	--------------------------------

25. Pension Funds.

None



If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER
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* * * * *

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 7/6/2007

Signature of Debtor s/ Lamond NMN Rushing, Sr.
Lamond NMN Rushing, Sr.

Date 7/6/2007

Signature of Joint Debtor s/ Patricia Lynn Johnson-Rushing
Patricia Lynn Johnson-Rushing

**UNITED STATES BANKRUPTCY COURT
Western District of Missouri**

In re: **Lamond NMN Rushing, Sr.**

Patricia Lynn Johnson-Rushing

Case No. _____

Chapter **11**

BUSINESS INCOME AND EXPENSES

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

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ _____

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income: \$ 37,500.00

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor)	\$ <u>15,000.00</u>
4. Payroll Taxes	<u>4,250.00</u>
5. Unemployment Taxes	<u>270.00</u>
6. Worker's Compensation	<u>0.00</u>
7. Other Taxes	<u>1,000.00</u>
8. Inventory Purchases (Including raw materials)	<u>0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u>0.00</u>
10. Rent (Other than debtor's principal residence)	<u>350.00</u>
11. Utilities	<u>800.00</u>
12. Office Expenses and Supplies	<u>250.00</u>
13. Repairs and Maintenance	<u>100.00</u>
14. Vehicle Expenses	<u>650.00</u>
15. Travel and Entertainment	<u>0.00</u>
16. Equipment Rental and Leases	<u>0.00</u>
17. Legal/Accounting/Other Professional Fees	<u>500.00</u>
18. Insurance	<u>200.00</u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u>0.00</u>
20. Payments to Be Made Directly By Debtor to Secured Creditors For	

Pre-Petition Business Debts (Specify):

None

21. Other (Specify):

Food

3,000.00

22. Total Monthly Expenses (Add items 3 - 21)

\$ 26,370.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2)

\$ 11,130.00

Form B22B (Chapter 11) (10/05)

In re Lamond NMN Rushing, Sr., Patricia Lynn Johnson-Rushing
 (s)

Case Number: _____
 (If known)

STATEMENT OF CURRENT MONTHLY INCOME
 FOR USE IN CHAPTER 11

In addition to Schedules I and J, this statement must be completed by every individual Chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. CALCULATION OF CURRENT MONTHLY INCOME																
1		<p>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.</p> <p>b. <input type="checkbox"/> Married, not filing jointly. Complete only Column A ("Debtor's Income") for Lines 2-10.</p> <p>c. <input checked="" type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.</p> <p>All figures must reflect average monthly income for the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If you received different amounts of income during these six months, you must total the amounts received during the six months, divide this total by six, and enter the result on the appropriate line.</p>	Column A Debtor's Income	Column B Spouse's Income												
2		Gross wages, salary, tips, bonuses, overtime, commissions.	\$2,532.50	\$0.00												
3		<p>Net income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference on Line 3. Do not enter a number less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">Gross Receipts</td> <td style="width: 10%; text-align: right;">\$</td> <td style="width: 25%;"></td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Business income</td> <td style="text-align: right;">Subtract Line b from Line a</td> <td></td> </tr> </table>	a.	Gross Receipts	\$		b.	Ordinary and necessary business expenses	\$		c.	Business income	Subtract Line b from Line a		\$0.00	\$37,000.00
a.	Gross Receipts	\$														
b.	Ordinary and necessary business expenses	\$														
c.	Business income	Subtract Line b from Line a														
4		<p>Net rental and other real property income. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">Gross Receipts</td> <td style="width: 10%; text-align: right;">\$ 0.00</td> <td style="width: 25%;"></td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary operating expenses</td> <td style="text-align: right;">\$ 0.00</td> <td></td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Rental income</td> <td style="text-align: right;">Subtract Line b from Line a</td> <td></td> </tr> </table>	a.	Gross Receipts	\$ 0.00		b.	Ordinary and necessary operating expenses	\$ 0.00		c.	Rental income	Subtract Line b from Line a		\$0.00	\$0.00
a.	Gross Receipts	\$ 0.00														
b.	Ordinary and necessary operating expenses	\$ 0.00														
c.	Rental income	Subtract Line b from Line a														
5		Interest, dividends, and royalties.	\$0.00	\$0.00												
6		Pension and retirement income.	\$0.00	\$0.00												
7		Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed.	\$0.00	\$0.00												
8		<p>Unemployment compensation. Enter the amount in Column A and, if applicable, Column B. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 10%;">Debtor \$ _____</td> <td style="width: 10%;">Spouse \$ _____</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">\$</td> <td style="width: 10%; text-align: center;">\$</td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____		\$	\$	\$	\$						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____		\$	\$											
9		<p>Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;"></td> <td style="width: 10%; text-align: right;">\$</td> <td style="width: 25%;"></td> </tr> </table>	a.		\$		\$0.00	\$0.00								
a.		\$														
		Total and enter on Line 9.														
10		Subtotal of current monthly income. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$2,532.50	\$37,000.00												

