Estimated Liabilities

Case 09-32341 Doc 1 B1 (Official Form 1) (1/08)	Filed 08/31/09	Entered 08 Page 1 of 5		6 Des	sc Main			
United Stat Western Dis	Voluntary Petition							
Name of Debtor (if individual, enter Last, First, Middle McCrory, Cynthia B	Name of Joint Debtor (Spouse) (Last, First, Middle):							
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):							
Last four digits of Soc. Sec. or Individual-Taxpayer I.E EIN (if more than one, state all): 4484	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):							
Street Address of Debtor (No. & Street, City, State & 2 8523 Viking Dr.	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):							
Waxhaw, NC	ZIPCODE 28173		Z	ZIPCODE				
County of Residence or of the Principal Place of Busin Union	County of Residence or of the Principal Place of Business:							
Mailing Address of Debtor (if different from street add	lress)	Mailing Address of Joint Debtor (if different from street address):						
[[:	ZIPCODE	_		7	IPCODE			
Location of Principal Assets of Business Debtor (if diff		pove):			псове			
				Z	IPCODE			
Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ✓ Full Filing Fee (Check one box) ✓ Full Filing Fee to be paid in installments (Applicable to in attach signed application for the court's consideration is unable to pay fee except in installments. Rule 100 3A.	☑ Debtor's aggregate noncontingent liquidated debts owed to non-insiders or							
Filing Fee waiver requested (Applicable to chapter 7 attach signed application for the court's consideration	affiliates are less than \$2,190,000. Check all applicable boxes: A plan is being filed with this petition Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).							
Statistical/Administrative Information ☐ Debtor estimates that funds will be available for dis ☐ Debtor estimates that, after any exempt property is distribution to unsecured creditors. Estimated Number of Creditors ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	excluded and administrative	e expenses paid, there		Over 100,000	THIS SPACE IS FOR COURT USE ONLY			
Estimated Assets Storough Sto	0,001 to \$10,000,001 \$5	0,000,001 to \$100,00	00,001 \$500,000,001					

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Prior Bankruptcy Case Filed Within Last 8	8 Years (If more than two, attach	additional sheet)
Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	ore than one, attach additional sheet)
Name of Debtor: See Attachment	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (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.) Exhibit A is attached and made a part of this petition.	(To be completed whose debts are p I, the attorney for the petitioner that I have informed the petition chapter 7, 11, 12, or 13 of ti explained the relief available ur that I delivered to the debtor to Bankruptcy Code.	if debtor is an individual rimarily consumer debts.) named in the foregoing petition, declar ner that [he or she] may proceed unde tle 11, United States Code, and have notice required by § 342(b) of the
	Signature of Attorney for Debtor(s)	Date
▼ No Exhi (To be completed by every individual debtor. If a joint petition is filed, e ▼ Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: □ Exhibit D also completed and signed by the joint debtor is attached.	ade a part of this petition.	ach a separate Exhibit D.)
		nis District for 180 days immediately
☐ There is a bankruptcy case concerning debtor's affiliate, general	partner, or partnership pending in	this District.
☐ Debtor is a debtor in a foreign proceeding and has its principal plot or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	but is a defendant in an action or pr	oceeding [in a federal or state court]
Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of debtor	plicable boxes.)	•
(Name of landlord or less	or that obtained judgment)	
(Address of lar	ndlord or lessor)	

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

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Name of Debtor(s):

McCrory, Cynthia B

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filing of the petition.

(This page must be completed and filed in every case)

Voluntary Petition

Doc 1

Filed 08/31/09

Document

(This page must be completed and filed in every case)

Name of Debtor(s): McCrory, Cynthia B

Signatures

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

Doc 1

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 State 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. §

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

/s/ Cynthia B McCrory

Signature of Debtor

Cynthia B McCrory

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 31, 2009

Date

Х

Signature of Attorney*

X /s/ R. Keith Johnson Signature of Attorney for Debtor(s)

> R. Keith Johnson 8840 R. Keith Johnson, P.A. 1275 Hwv. 16 South Stanley, NC 28164

August 31, 2009

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

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

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

Signature of Authorized Individual Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

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

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Repre	sentative	

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); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

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

Address

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

Date

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.

CYNTHIA B. MCCRORY, DEBTOR

ATTACHMENT TO VOLUNTARY PETITION

PENDING BANKRUPTCY:

First Colony Holdings, II, LLC First Colony Healthcare Holdings, LLC Ethan Allen Brown, Jr.

These affiliates of the Debtor will be filing bankruptcy cases in the Western District of North Carolina, simultaneous with the filing by the Debtor.

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Case No.

Desc Main

IN RE McCrory, Cynthia B

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

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

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

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. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1600				T			
BB&T Visa P.O. Box 698 Wilson, NC 27894-0698							5,709.67
ACCOUNT NO. 0890					٦		·
Chase - Visa P.O. Box 15153 Wilmington, DE 19886-5153							6,138.00
ACCOUNT NO.			Business debt of	T		Х	.,
Heidi Wilson C/O Rick Rayburn 227 W. Trade St., Ste. 1200 Charlotte, NC 28202							430,000.00
ACCOUNT NO.							
0 continuation sheets attached			[S (Total of th	Subi			\$ 441,847.67
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Related	also atist	tica	n ıl	\$ 441.847.67

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