

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NORTH DAKOTA

Case number (if known) _____

Chapter you are filing under:

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

William

First name

M

Middle name

Lohman

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Marty Lohman

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-8334

Debtor 1 **William M Lohman**

Case number (if known)

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

I have not used any business name or EINs.

FDBA All Pro Moving and Delivery LLC
DBA All Pro Truck and Trailer Repair LLC
DBA All Pro Towing LLC
DBA AP Relocations, LLC

Include trade names and *doing business as* names

Business name(s)

EINs

I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live

1003 Morningside Drive
Casselton, ND 58012-3714

Number, Street, City, State & ZIP Code

Cass

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 William M Lohman

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

8. **How you will pay the fee** **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** No.
- Yes.

Eastern District of California (Sacramento)

District Eastern District of California (Sacramento) When 11/30/11 Case number 11-47901

District _____ When _____ Case number _____

District _____ When _____ Case number _____

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No.
- Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, if known _____

Debtor _____ Relationship to you _____

District _____ When _____ Case number, if known _____

11. **Do you rent your residence?** No. Go to line 12.
- Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- No. Go to line 12.
- Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 William M Lohman

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

See Attachment

Name of business, if any _____

Number, Street, City, State & ZIP Code _____

Check the appropriate box to describe your business:

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

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

No.

Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

Number, Street, City, State & Zip Code _____

Debtor 1 **William M Lohman**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 William M Lohman

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”
- No. Go to line 16b.
- Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- No. Go to line 16c.
- Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer debts or business debts
- _____

17. Are you filing under Chapter 7?
- No. I am not filing under Chapter 7. Go to line 18.
- Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- No
- Yes
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

18. How many Creditors do you estimate that you owe?
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, 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.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ William M Lohman
William M Lohman
 Signature of Debtor 1

Signature of Debtor 2

Executed on April 14, 2016
 MM / DD / YYYY

Executed on _____
 MM / DD / YYYY

Debtor 1 William M Lohman

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Sara E. Diaz

Date

April 14, 2016

Signature of Attorney for Debtor

MM / DD / YYYY

Sara E. Diaz

Printed name

Bulie Law Office

Firm name

217 S. 4th Street

Grand Forks, ND 58201

Number, Street, City, State & ZIP Code

Contact phone 701-738-1030

Email address

sara@bulielaw.com

ND06069 MN0394832

Bar number & State

Debtor 1 William M Lohman

Case number (if known) _____

Fill in this information to identify your case:

Debtor 1 William M Lohman
First Name Middle Name Last Name

Debtor 2
 (Spouse if, filing) _____
First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number _____
 (if known)

Check if this is an amended filing

FORM 101. VOLUNTARY PETITION ATTACHMENT

Additional Sole Proprietorship(s)

All Pro Truck and Trailer Repair, LLC

Name of business, if any

**1003 Morningside Dr
Casselton, ND 58012-3714**

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

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

All Pro Towing LLC

Name of business, if any

**1003 Morningside Dr
Casselton, ND 58012-3714**

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

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

Debtor 1 **William M Lohman**

Case number *(if known)*

AP Relocations, LLC

Name of business, if any

**1003 Morningside Dr.
Casselton, ND 58012-3714**

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

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

Fill in this information to identify your case:

Debtor 1 **William M Lohman**
 First Name Middle Name Last Name

Debtor 2
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NORTH DAKOTA

Case number _____
 (if known)

Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

		Unsecured claim	
1	<p>Ally Financial Po Box 380901 Bloomington, MN 55438</p> <hr/> <p>Contact _____</p> <hr/> <p>Contact phone _____</p>	<p>What is the nature of the claim?</p> <p>2015 Chevrolet Tahoe LT 30,000 miles Leather, Navigation, premium sound, 4x4</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured) \$ \$57,910.00 Value of security: - \$ \$37,000.00 Unsecured claim \$ \$20,910.00</p>	<p>\$ \$20,910.00</p> <hr/>

2	<p>Ally Financial Po Box 380901 Bloomington, MN 55438</p> <hr/> <p>Contact _____</p> <hr/> <p>Contact phone _____</p>	<p>What is the nature of the claim?</p> <p>2015 Chevrolet Tahoe LT 30,000 miles Leather, Navigation, premium sound, 4x4</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply</p>	<p>\$ \$16,264.00</p> <hr/>
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Debtor 1 William M Lohman Case number (if known) _____

 Contact

 Contact phone

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ **\$61,115.00**
 Value of security: - \$ **\$44,851.00**
 Unsecured claim \$ **\$16,264.00**

3
Anderson Bottrell, Sanden & Thompson
Post Office Box 10247
Fargo, ND 58106-0247

 Contact

 Contact phone

What is the nature of the claim? Legal Expenses \$ **\$13,607.74**
As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply
Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

4
Capital One Retail Services
PO Box 30285
Salt Lake City, UT 84130

 Contact

 Contact phone

What is the nature of the claim? _____ \$ **\$6,519.32**
As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply
Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

5
Capital One Retail Services
PO Box 7680
Carol Stream, IL 60116-7680

 Contact

 Contact phone

What is the nature of the claim? 2014 Yamaha YZ250F \$ **\$6,519.00**
As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply
Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ **\$6,519.00**
 Value of security: - \$ **\$0.00**
 Unsecured claim \$ **\$6,519.00**

6

What is the nature of the claim? Judgment entered in Ward County District \$ **\$95,470.00**

Debtor 1 William M Lohman Case number (if known) _____



CDJ Properties, LLP
Post Office Box 370
Minot, ND 58702

Court, Minot, ND Court
Filed No.
51.2015.CV.01992

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact _____

Contact phone _____



First International Bank & Trust
313 Fox Hills Parkway N
Watford City, ND 58854

What is the nature of the claim?

Judgment entered in \$ \$30,368.64
Cass County District
Court, Fargo, North
Dakota Court File No.
09-2016-CV-00157

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Contact _____

Contact phone _____



First Western Bank
900 S Broadway
Minot, ND 58701

What is the nature of the claim?

2015 Chevrolet \$ \$8,073.00
Silverado Crew Cab
2500 LTZ 37,000 miles

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ **\$51,515.00**
Value of security: - \$ **\$43,442.00**
Unsecured claim \$ **\$8,073.00**

Contact _____

Contact phone _____



Harley Davidson Financial
Attention: Bankruptcy

What is the nature of the claim?

Automobile \$ \$18,349.00

Debtor 1 William M Lohman Case number (if known) _____

**Po Box 22048
Carson City, NV 89721**

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

 Contact _____

 Contact phone _____

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ **\$18,349.00**
 Value of security: - \$ **Unknown**
 Unsecured claim \$ **\$18,349.00**

10

**Honda Financial Services
PO Box 1844
Alpharetta, GA 30023-1844**

**What is the nature of the claim? 2014 Honda TRX400X \$ \$5,400.00
Base
All Terrain Vehicle**

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

 Contact _____

 Contact phone _____

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ **\$6,900.00**
 Value of security: - \$ **\$1,500.00**
 Unsecured claim \$ **\$5,400.00**

11

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

**What is the nature of the claim? 941 Taxes ending \$ \$12,044.29
September 30, 2015
All Pro Moving and
Delivery, LLC**

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

 Contact _____

 Contact phone _____

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

12

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

What is the nature of the claim? \$ \$78,535.00

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Debtor 1 William M Lohman Case number (if known) _____

 Contact _____

 Contact phone _____

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ **\$78,535.00**
 Value of security: - \$ **\$0.00**
 Unsecured claim \$ **\$78,535.00**

13

Jemmer Distributing, LLC
3676 South 1700 East Ste. B
Saint George, UT 84790

 Contact _____

 Contact phone _____

What is the nature of the claim? **Judgment entered in** \$ **\$13,367.65**
Ward County District
Court, Minot, ND Court
File No.
51-2015-SC-00067;
Transcribed to Cass
County ND Court File
No. 09-2015-SC-002

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

14

K&H Farms
55937 State Highway 19
Winthrop, MN 55396

 Contact _____

 Contact phone _____

What is the nature of the claim? **Summary Judgment** \$ **\$759,342.99**
granted February 29,
2016
Sibley County District
Court, State of
Minnesota
72-CV-14-51

As of the date you file, the claim is: Check all that apply
 Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?
 No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

15

What is the nature of the claim? **Judgment Entered in** \$ **\$5,188.03**
Cass County Small
Claims Court, Fargo
North Dakota, Court
File No.

Debtor 1 William M Lohman Case number (if known) _____

09-2015-SC-00446

Luther Family Ford
3302 36th Street SW
Fargo, ND 58104

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

Contact _____

Contact phone _____

16

ND Office Of State Tax
Commissioner
600 E Boulevard Ave Dept 127
Bismarck, ND 58505-0602

What is the nature of the claim? **Sales and Use Tax** \$ **\$7,503.04**
Obligation of All Pro
Truck and Trailer
Repair LLC

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

Contact _____

Contact phone _____

17

O'Keeffe, O'Brien, Lyson & Foss
720 Main Avenue South
PO Box 2105
Fargo, ND 58103

What is the nature of the claim? **Legal fees** \$ **\$13,676.72**

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

Does the creditor have a lien on your property?

- No
- Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

Contact _____

Contact phone _____

18

Quality Auto Body Shop, Inc.
404 25th Street South
Fargo, ND 58103

What is the nature of the claim? **Judgment in Cass** \$ **\$16,813.09**
County District Court,
Fargo, ND Court File
No. 09-2015-CV-03099

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Debtor 1 William M Lohman Case number (if known) _____

- None of the above apply

Does the creditor have a lien on your property?

- No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

 Contact

 Contact phone

19

Townhomes at Stonebridge
4650 38th Ave. S., Ste. 110
ND 58101-4000

What is the nature of the claim? Judgment in Ward County District Court, Minot, ND Court File No. 51-2014-CV-01146 \$ \$6,340.00

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

- No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

 Contact

 Contact phone

20

United Accounts Inc
Po Box 9239
Fargo, ND 58106

What is the nature of the claim? Collection Attorney Prairie Property Mgmt \$ \$9,478.00

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
 None of the above apply

Does the creditor have a lien on your property?

- No
 Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

 Contact

 Contact phone

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ William M Lohman
William M Lohman
 Signature of Debtor 1

X _____
 Signature of Debtor 2

Date April 14, 2016

Date _____

AAA LEASING LIMITED PARTNERSHIP
311 MAIN STREET
EDGELEY, ND 58433

ALLY FINANCIAL
PO BOX 380901
BLOOMINGTON, MN 55438

ANDERSON BOTTRELL, SANDEN & THOMPSON
POST OFFICE BOX 10247
FARGO, ND 58106-0247

ANDERSON BROTHERS, INC.
POST OFFICE BOX 277
EDGELEY, ND 58433

ASA K. BURCK
KALER DOELING PLLP
POST OFFICE BOX 9231
FARGO, ND 58106-9231

BC SERVICES
PO BOX 1317
LONGMONT, CO 80502

BIERSCHBACH EQUIPMENT & SUPPLY
4001 MAIN AVENUE
FARGO, ND 58103

CAPITAL ONE
ATTN: BANKRUPTCY
PO BOX 30285
SALT LAKE CITY, UT 84130

CAPITAL ONE
POST OFFICE BOX 85619
RICHMOND, VA 23285-5619

CAPITAL ONE RETAIL SERVICES
PO BOX 30285
SALT LAKE CITY, UT 84130

CAPITAL ONE RETAIL SERVICES
PO BOX 7680
CAROL STREAM, IL 60116-7680

CASS COUNTY TREASURER
PROPERTY TAX DIVISION
211 9TH ST S
FARGO, ND 58103-1833

CDJ PROPERTIES, LLP
POST OFFICE BOX 370
MINOT, ND 58702

CHRISTOPHER CARLSON
ATTORNEY AT LAW
PO BOX 1097
BISMARCK, ND 58502-1097

COMENITY BANK/BUCKLE
PO BOX 182125
COLUMBUS, OH 43218

CREDIT COLLECTION SERVICES
701 DOUGLAS AVE.
YANKTON, SD 57078-3529

CREDIT FIRST/CFNA
BK13 CREDIT OPERATIONS
PO BOX 818011
CLEVELAND, OH 44181

DISH
PO BOX 7203
PASADENA, CA 91109-7303

FIRST INTERNATIONAL BANK & TRUST
313 FOX HILLS PARKWAY N
WATFORD CITY, ND 58854

FIRST PREMIER BANK
601 S MINNIAPOLIS AVE
SIOUX FALLS, SD 57104

FIRST STATE BANK OF NORTH DAKOTA
41 LANGER AVE. S.
PO BOX 70
CASSELTON, ND 58012

FIRST UNITED BANK
300 MAIN STREET
ADAMS, ND 58210

FIRST WESTERN BANK
900 S BROADWAY
MINOT, ND 58701

FIRST WESTERN BANK & TRUST
900 SOUTH BROADWAY
PO BOX 1090
MINOT, ND 58702-1090

GRABITSKE LAW FIRM
403 S. BROAD ST. SUITE 20
MANKATO, MN 56001

HAGEN DENTAL
POST OFFICE BOX 520
CASSELTON, ND 58012-0520

HARLEY DAVIDSON FINANCIAL
ATTENTION: BANKRUPTCY
PO BOX 22048
CARSON CITY, NV 89721

HARLEY-DAVIDSON CREDIT CORP
DEPT 15129
PALATINE, IL 60055-5129

HONDA FINANCIAL SERVICES
PO BOX 1844
ALPHARETTA, GA 30023-1844

INTERNAL REVENUE SERVICE
CENTRALIZED INSOLVENCY OPERATION
P O BOX 7346
PHILADELPHIA, PA 19101-7346

JEMMER DISTRIBUTING, LLC
3676 SOUTH 1700 EAST STE. B
SAINT GEORGE, UT 84790

JOHN D. DOCKEN
ATTORNEY AT LAW
3001 25TH STREET SOUTH
FARGO, ND 58103

K&H FARMS
55937 STATE HIGHWAY 19
WINTHROP, MN 55396

KOHL'S/CAPITAL ONE
PO BOX 3120
MILWAUKEE, WI 53201

KUBOTA CREDIT CORP
1025 NORTHBROOK PARKWAY
SUWANNEE, GA 30024

KUBOTA CREDIT CORPORATION U.S.A.
4400 AMON CARTER BLVD. STE. 100
FORT WORTH, TX 76155

KYLE G. PENDER
ATTORNEY AT LAW
PO BOX 9199
FARGO, ND 58106-9199

LUTHER FAMILY FORD
3302 36TH STREET SW
FARGO, ND 58104

ND OFFICE OF STATE TAX COMMISSIONER
600 E BOULEVARD AVE DEPT 127
BISMARCK, ND 58505-0602

NORTHLAND RECEIVABLES
900 NORTH BROADWAY
MINOT, ND 58702

O'KEEFFE, O'BRIEN, LYSON & FOSS
720 MAIN AVENUE SOUTH
PO BOX 2105
FARGO, ND 58103

PAUL M. PROBST
ATTORNEY AT LAW
600 22ND AVE. NW
MINOT, ND 58703

PRO COLLECT SERVICES LLC
PO BOX 389
MINOT, ND 58702-0389

QUALITY AUTO BODY SHOP, INC.
404 25TH STREET SOUTH
FARGO, ND 58103

RISENOUR LAW OFFICE
POST OFFICE BOX 1836
JAMESTOWN, ND 58402-1836

SHELDON ZANE MCCOY
2928 WHEATLAND DR. SOUTH
FARGO, ND 58103

STATE BANK & TRUST OF KENMARE
PO BOX 727
KENMARE, ND 58746-0727

STATE OF NORTH DAKOTA
WORKFORCE SAFETY & INSURANCE
BISMARCK, ND 58505-0040

SYNCHRONY BANK/ JC PENNEYS
ATTN: BANKRUPTCY
PO BOX 103104
ROSWELL, GA 30076

SYNCHRONY BANK/WALMART
ATTN: BANKRUPTCY
PO BOX 103104
ROSWELL, GA 30076

TARGET
C/O FINANCIAL & RETAIL SERVICES
MAILSTOP BT PO BOX 9475
MINNEAPOLIS, MN 55440

TIDEWATER CREDIT SERVI
6520 INDIAN RIVER RD
VIRGINIA BEACH, VA 23464

TIMEPAYMENT CORP LLC
16 NEW ENGLAND EXECUTIVE OFFICE PARK S.
BURLINGTON, MA 01803

TIMOTHY RANDALL MURPHY
ATTORNEY AT LAW
2297 WATERS DRIVE
SAINT PAUL, MN 55120

TOWNHOMES AT STONEBRIDGE
4650 38TH AVE. S., STE. 110
ND 58101-4000

TRAC/CBSD
PO BOX 6500
SIOUX FALLS, SD 57117

UNITED ACCOUNTS INC
PO BOX 9239
FARGO, ND 58106

UNITED STATES ATTORNEY
655 1ST AVE N STE 250
FARGO, ND 58102-4932

VERIZON
POST OFFICE BOX 4005
ACWORTH, GA 30101-9006

WESTERN NATL MUTUAL INS. COMPANY
C/O CT CORPORATION, REGISTERED AGENT
314 EAST THAYER AVENUE
BISMARCK, ND 58501

WESTERN NATL MUTUAL INSURANCE CO.
5350 WEST 78TH STREET
MINNEAPOLIS, MN 55439

WILLIAM C. WORTHINGTON JR
WORTHINGTON LAW FIRM
PO BOX 2087
MINOT, ND 58702-2087

WORKFORCE SAFETY & INSURANCE
PO BOX 5585
BISMARCK, ND 58506-5585