Case 10-43325-MS Doc 1 Filed 10/27/10 Entered 10/27/10 16:41:27 Desc Main

B1 (Official Form 1) (4/10)	C	Doci	ument	Page 1	of 14	1						
United S Dis	tates Ba trict of l	inkr	uptcy	Court				Vo	luntary Petition			
Name of Debtor (if individual, enter Last, First, M Calero, Francisco		Name of Joint Debtor (Spouse) (Last, First, Middle): Calero, Sylvia										
All Other Names used by the Debtor in the last 8 y (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-Taxpaye EIN (if more than one, state all): 2580		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 2581										
Street Address of Debtor (No. & Street, City, State & Zip Code): 615 87th St. North Bergen, NJ					Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 615 87th St. North Bergen, NJ							
	ZIPCOD	DE 07()47						ZIPCODE 07047			
County of Residence or of the Principal Place of B Hudson	usiness:			County of Hudson	Residence	e or of t	he Principal Pla	ce of Busi	iness:			
Mailing Address of Debtor (if different from street	address)			Mailing Ac	ldress of	Joint De	ebtor (if differer	nt from str	reet address):			
	ZIPCOD	Ε						Γ	ZIPCODE			
Location of Principal Assets of Business Debtor (in	f different fro	om stre	eet address	above):								
615 87th St., North Bergen, NJ								Γ	ZIPCODE 07047			
Type of Debtor (Form of Organization)				f Business			-		y Code Under Which			
(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.) Filing Fee (Check one box) ✓ Full Filing Fee attached Filing Fee to be paid in installments (Applicable	ss state as defined i mpt Entity if applicable.) npt organization vd States Code (th ode). ne box:	applicable.) § 101(8) as "incurred by an t organization under individual primarily for a States Code (the personal, family, or house- b). hold purpose." Chapter 11 Debtors										
only). Must attach signed application for the cou- consideration certifying that the debtor is unable except in installments. Rule 1006(b). See Offici	urt's e to pay fee al Form 3A.		Check if Debto than \$: or's aggregate no: 62,343,300 (<i>amo</i>	ncontinge unt subjec	ent liquio et to adj	dated debts owe	ed to non-i 1/13 and e	nsiders or affiliates are less every three years thereafter).			
Filing Fee waiver requested (Applicable to chap only). Must attach signed application for the cou consideration. See Official Form 3B.		uais	A plan	Il applicable box n is being filed w ptances of the pla dance with 11 U.	rith this p n were so	licited j	prepetition from	one or m	ore classes of creditors, in			
 Statistical/Administrative Information ✓ Debtor estimates that funds will be available for ☐ Debtor estimates that, after any exempt proper distribution to unsecured creditors. 					id, there v	vill be n	o funds availab	le for	THIS SPACE IS FOR COURT USE ONLY			
5,] 000- 000	5,001 10,00		10,001- 25,000	25,001- 50,000		50,001- 100,000	Over 100,000				
] 1,000,001 to 10 million			50,000,001 to \$100 million	100,00 to \$500		5500,000,001 to \$1 billion	More that \$1 billion				
Estimated Liabilities	1,000,001 to			50,000,001 to \$100 million			500,000,001 \$500 \$1 billion					

Case 10-43325-MS Doc 1 Filed 10/27/1 B1 (Official Form 1) (4/10) Document	0 Entered 10/27/10 10 Page 2 of 14	6:41:27 Desc Main Page 2
Voluntary Petition	Name of Debtor(s):	
(This page must be completed and filed in every case)	Calero, Francisco & Calero,	
Prior Bankruptcy Case Filed Within Last 8		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 mor	re than one, attach additional sheet)
Name of Debtor: None	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.)	(To be completed whose debts are pr I, the attorney for the petitioner r that I have informed the petition chapter 7, 11, 12, or 13 of tit explained the relief available un	chibit B if debtor is an individual imarily consumer debts.) named in the foregoing petition, declare her that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify he notice required by § 342(b) of the
	Signature of Attorney for Debtor(s)	Date
Exhi Does the debtor own or have possession of any property that poses or is a or safety? Yes, and Exhibit C is attached and made a part of this petition. No		t and identifiable harm to public health
Exhi (To be completed by every individual debtor. If a joint petition is filed, ea ✓ 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	ach spouse must complete and attac de a part of this petition.	ch a separate Exhibit D.)
Information Regardin	ng the Debtor - Venue	
(Check any ap Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180		is District for 180 days immediately
There is a bankruptcy case concerning debtor's affiliate, general		
Debtor is a debtor in a foreign proceeding and has its principal pl 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 pro	oceeding [in a federal or state court]
Certification by a Debtor Who Reside		Property
(Check all app) ☐ Landlord has a judgment against the debtor for possession of deb		omplete the following.)
(Name of landlord or less	or that obtained judgment)	
(Address of lan	dlord or lessor)	
Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post		
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	ring the 30-day period after the
Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(l)).	

Case 10-43325-MS Doc 1 Filed 10/27/1 B1 (Official Form 1) (4/10) Document	Page 3 of 14 Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Calero, Francisco & Calero, Sylvia
	atures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
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. § 342(b).	 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.
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	
	X
X /s/ Francisco Calero	Signature of Foreign Representative
Signature of Debtor Francisco Calero	
X /s/ Sylvia Calero	Printed Name of Foreign Representative
Signature of Joint Debtor Sylvia Calero	
Telephone Number (If not represented by attorney)	Date
October 27, 2010	
Date	
Signature of Attorney*	Signature of Non-Attorney Petition Preparer
Signature of Attorney	
X /s/ Ronald I. LeVine	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for
Signature of Attorney for Debtor(s)	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),
Ronald I. LeVine Law Firm of Ronald I. LeVine	110(h) and 342(b); 3) if rules or guidelines have been promulgated
210 River St., Suite 24	pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor
Hackensack, NJ 07601	notice of the maximum amount before preparing any document for filing
(201) 489-7900 Fax: (201) 489-1395	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
	Printed Name and file, if any, of Bankrupicy 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.)
October 27, 2010	
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	Address
certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	
	x
Signature of Debtor (Corporation/Partnership)	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or
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	partner whose social security number is provided above.
petition on behalf of the debtor.	
r ·····	Date
The debtor requests relief in accordance with the chapter of title 11,	Names and Social Security numbers of all other individuals who
United States Code, specified in this petition.	prepared or assisted in preparing this document unless the bankruptcy
x	petition preparer is not an individual:
Signature of Authorized Individual	
	If more than one person prepared this document, attach additional
Printed Name of Authorized Individual	sheets conforming to the appropriate official form for each person.
	A bankruptcy petition preparer's failure to comply with the provisions
Title of Authorized Individual	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.
Date	

Case 10-43325-MS [B1D (Official Form 1, Exhibit D) (12/09)

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IN RE: Case No. _____

Debtor(s)

Calero, Francisco

Chapter 11

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE 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.

 \checkmark 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*.

 \Box 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 14 days after your bankruptcy case is filed.*

 \Box 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven 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. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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.);
- 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/ Francisco Calero

Date: October 27, 2010

Case 10-43325-MS [B1D (Official Form 1, Exhibit D) (12/09)

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IN RE: Case No. _____

Debtor(s)

Calero, Sylvia

Chapter 11

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE 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.

 \checkmark 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 14 days after your bankruptcy case is filed.*

 \Box 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven 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. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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.);
- 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/ Sylvia Calero

Date: October 27, 2010

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IN RE:	
Calero, Francisco & Calero, Sylvia	

Case No.

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Debtor(s)

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

		(2)		
(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim (if secured also state value of security)
Wells Fargo Home Mortgage				380,015.00
Attn: Zucker Goldberg, Et. Al				Collateral:
POB 1024				0.00
Mountainside, NJ 07092				Unsecured: 380,015.00
Wells Fargo Home Mortgage				297,007.00
POB 30086				Collateral:
Los Angelas, CA 90030				0.00
				Unsecured: 297,007.00
Chase Home Loans				197,309.00
Attn: Shapiro & Fishman, LLP				Collateral:
2424 N. Federal Highway, #360				0.00
Boca Raton, FL 33431				Unsecured: 197,309.00
Wells Fargo Home Equity Lines				165,074.00
POB 31557				Collateral:
Billings, MT 59107				0.00
-				Unsecured:
				165,074.00
Bank Of America Attn: Mercantile Adjustment Bureau, LLC POB 9016 Williamsville, NY 14231				145,258.00
Chase Home Loans				119,403.00
10790 Rancho Bernardo Rd.				Collateral:
San Diego, CA 92127				0.00
				Unsecured:
				119,403.00
Small Business Administration				44,800.00
Attn: Linebarger Goggan, Et. Al POB 3585				
Houston, TX 77253				
Citi Bank				37,236.00
Attn: Asset Acceptance, LLC				,
POB 2036				
Warren, MI 48090				
Bank of America				37,236.00
Attn: Asset Acceptance				
POB 1630 Warren, MI 48090				
Marton, mr 40030				

DocumentPage 7 of 1433,794.56Attn: Linebarger Goggan, Et. Al POB 358533,794.5633,794.56Houston, TX 7725333,794.56Small Business Administration Attn: Linebarger Goggan, Et. Al POB 358533,794.56Houston, TX 7725328,135.00Advanta Bank Corp Attn: Sentry Credit, Inc POB 1207028,135.00POB 1207026,805.00Everett, WA 9820626,805.00Fia Card Services26,805.00Attn: Hayt, Hayt & Landau LLC POB 50026POB 5007224Chase Bank USA13,443.00Attn: United Recovery Systems POB 7229210,330.00Attn: United Recovery Systems POB 50610,065.00POB 6180Omaha, NE 6810510,065.00Capital One Bank (USA), N.A. Attn: Pressler & Pressler 7 Entin Rd. Parsipany, NJ 070548,338.400HSBC/Attantic Credit & Finanace Ranoke, VA 240368,384.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,401.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00POB 130656,512.00	Case 10-43325-MS	Doc 1		Entered 10/27/10 16:41:27	Desc Main
Attr: Linebarger Goggan, Et. Al POB 3585 Houston, TX 77253 Advanta Bank Corp Advanta Bank Corp Attr: Serty Credit, Inc POB 12070 Everett, WA 98206 Fia Card Services 26,805.00 Attr: Hayt, Hayt & Landau LLC POB 500 Eatontown, NJ 07724 Chase Bank USA Attr: NAFS POB 9027 Willimasville, NY 14231 Discover Chase Bank USA Attr: VAFS POB 9027 Willimasville, NY 14231 Discover Attr: United Recovery Systems POB 722929 Houston, TX 77272 American Express POB 6618 Omaha, NE 68105 Capital One Bank (USA), N.A. Attr: Pressler & Pressler 7 Entin Rd. Parsippany, NJ 07054 HSBC/Atlantic Credit & Finanace Attr: John P. Frye, P.C. POB 10565 Roanoke, VA 24036 FISE Bank/Union Plus POB 9730 POB 101 HSBC Bank/Union Plus POB 9720 Potland, OR 97280 Potland, OR 97280 Post 131	Attn: Linebarger Goggan, Et. Al POB 3585		Document P	age 7 of 14	33,794.56
Advanta Bank Corp 28,135.00 Attn: Sentry Credit, Inc 28,135.00 POB 12070 Everett, WA 98206 Fia Card Services 26,805.00 Attn: Hayt, Hayt & Landau LLC 26,805.00 POB 500 Eatontown, NJ 07724 Chase Bank USA 13,443.00 Attn: HAYS 10,330.00 Attn: NAFS 10,330.00 POB 9027 10,330.00 Millimasville, NY 14231 10,330.00 Discover 10,330.00 Attn: United Recovery Systems 10,065.00 POB 6618 10,065.00 Omaha, NE 68105 8,539.74 Capital One Bank (USA), N.A. 8,539.74 Attn: Pressler & Pressler 7 T Entin Rd. 8,539.74 POB 13665 8,384.00 Roanoke, VA 24036 8,384.00 HSBC/Atlantic Credit & Finanace 8,384.00 Attn: John P. Frye, P.C. POB 13655 Roanoke, VA 24036 6,512.00 POB 57280 6,512.00 POItand, OR 97280 6,401.00 POB 17313 6,401.00	Small Business Administration Attn: Linebarger Goggan, Et. Al POB 3585				33,794.56
Fia Card Services 26,805.00 Attn: Hayt, Hayt & Landau LLC POB 500 Eatontown, NJ 07724 13,443.00 Chase Bank USA 13,443.00 Attn: NAFS POB 9027 Willimasville, NY 14231 10,330.00 Attn: United Recovery Systems 10,330.00 POB 722929 10,065.00 Houston, TX 77272 10,065.00 American Express 10,065.00 Omaha, NE 68105 10,065.00 Capital One Bank (USA), N.A. 8,539.74 Attn: Preseler & Pressler 7 8,539.74 Attn: Preseler & Pressler 7 8,384.00 Attn: Jon P. Frye, P.C. 8,384.00 POB 13665 6,512.00 POB 37280 6,512.00 POB 97280 6,401.00 POB 17313 6,401.00	Advanta Bank Corp Attn: Sentry Credit, Inc POB 12070				28,135.00
Chase Bank USA13,443.00Attn: NAFSPOB 9027POB 902710,330.00Willimasville, NY 1423110,330.00Discover10,330.00Attn: United Recovery Systems10,065.00POB 722929Houston, TX 77272American Express10,065.00POB 66180Omaha, NE 681056,539.74Capital One Bank (USA), N.A.8,539.74Attn: Pressler & Pressler77 Entin Rd.7Parsippany, NJ 070548,384.00HSBC/Atlantic Credit & Finanace8,384.00Attn: John P. Frye, P.C.8,384.00POB 13665Roanoke, VA 24036HSBC Bank/Union Plus6,512.00POB 972800Portland, OR 972806,401.00POB 173136,401.00	Fia Card Services Attn: Hayt, Hayt & Landau LLC POB 500				26,805.00
Discover10,330.00Attn: United Recovery Systems10,330.00POB 72292910,065.00Houston, TX 7727210,065.00American Express10,065.00Omaha, NE 6810510,065.00Capital One Bank (USA), N.A.8,539.74Attn: Pressler & Pressler77 Entin Rd.8,539.74Parsippany, NJ 0705410,065.00HSBC/Atlantic Credit & Finanace8,384.00Attn: John P. Frye, P.C.8,384.00POB 136656,512.00Roanoke, VA 240366,512.00POB 972800Portland, OR 972806,401.00POB 173136,401.00	Chase Bank USA Attn: NAFS POB 9027				13,443.00
American Express10,065.00POB 66180maha, NE 68105Capital One Bank (USA), N.A.8,539.74Attn: Pressler & Pressler77 Entin Rd.8,539.74Parsippany, NJ 070548,384.00HSBC/Atlantic Credit & Finanace8,384.00Attn: John P. Frye, P.C.8,384.00POB 136656,512.00POB 972806,512.00Portland, OR 972806,401.00POB 173136,401.00	Discover Attn: United Recovery Systems POB 722929				10,330.00
Capital One Bank (USA), N.A.8,539.74Attn: Pressler & Pressler77 Entin Rd.7Parsippany, NJ 070548,384.00HSBC/Atlantic Credit & Finanace8,384.00Attn: John P. Frye, P.C.8,384.00POB 136656,512.00Roanoke, VA 240366,512.00HSBC Bank/Union Plus6,512.00POB 972806,512.00Portland, OR 972806,401.00POB 173136,401.00	American Express POB 6618				10,065.00
HSBC/Atlantic Credit & Finanace8,384.00Attn: John P. Frye, P.C.POB 13665POB 136656,512.00Roanoke, VA 240366,512.00HSBC Bank/Union Plus6,512.00POB 972806,512.00Portland, OR 972806,401.00Mastercard6,401.00POB 173136,401.00	Capital One Bank (USA), N.A. Attn: Pressler & Pressler 7 Entin Rd.				8,539.74
POB 97280 Portland, OR 97280 Mastercard 6,401.00 POB 17313 6,401.00	HSBC/Atlantic Credit & Finanace Attn: John P. Frye, P.C. POB 13665				8,384.00
Mastercard 6,401.00 POB 17313	HSBC Bank/Union Plus POB 97280				6,512.00
	Mastercard POB 17313				6,401.00

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: October 27, 2010	Signature /s/ Francisco Calero	Francisco Calero
Date: October 27, 2010	Signature / s/ Sylvia Calero of Joint Debtor (if any)	Sylvia Calero

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		Document P	age 8 of 14	

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Case No.

(If known)

Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

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

List creditors in alphabetical order to the extent practicable. If a minor child is the 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). If all secured creditors will not fit on this page, use the continuation sheet provided.

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

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

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

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

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND 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. 3060 Chase Home Loans 10790 Rancho Bernardo Rd. San Diego, CA 92127			Mortgage, Condo, 19201, Unit 221, Collins Ave., Miami, FL				119,403.00	119,403.00
			VALUE \$					
ACCOUNT NO. 4911 Chase Home Loans Attn: Shapiro & Fishman, LLP 2424 N. Federal Highway, #360 Boca Raton, FL 33431			Mortgage, Condo 19201, Unit 1124, Collins Ave., Miami, FL				197,309.00	197,309.00
-			VALUE \$					
ACCOUNT NO. 2277 Wells Fargo Home Equity Lines POB 31557 Billings, MT 59107			2nd Mortgage, Residence, 615 87th St., North Bergen, NJ				165,074.00	165,074.00
			VALUE \$					
ACCOUNT NO. 8508 Wells Fargo Home Mortgage Attn: Zucker Goldberg, Et. Al POB 1024 Mountainside, NJ 07092	_		Mortgage, 6009 Jefferson St., West New York, NJ				380,015.00	380,015.00
			VALUE \$					
1 continuation sheets attached			(Total of the control of the control of the control on the control	nis j	Tot	e) al	\$ 861,801.00 \$	\$ 861,801.00 \$

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

(Report also on

Summary of Schedules.)

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(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND 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. 1261			1st Mortgage, Residence, 615 87th St.,				297,007.00	297,007.00
Wells Fargo Home Mortgage POB 30086 Los Angelas, CA 90030			North Bergen, NJ					
			VALUE \$	1				
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.				┢				
			VALUE \$					
ACCOUNT NO.				F				
			VALUE \$					
Sheet no. <u>1</u> of <u>1</u> continuation sheets attach	ed	to		Sul	otot	al		
Schedule of Creditors Holding Secured Claims			(Total of th		pag Tot		\$ 297,007.00	\$ 297,007.00
			(Use only on la	st j	pag	e)	\$ 1,158,808.00	
							(Report also on Summary of Schedules)	(If applicable, report also on Statistical Summary of Certain

Liabilities and Related Data.)

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(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

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).

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 "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Cours.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors 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 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 \$11,725* 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 \$5,775* 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 \$2,600* 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 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

Debtor(s)

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Summary of Certain Liabilities and Related Data.)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Debtor(s)

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. 0142			Possible personal liability for business expense				
Advanta Bank Corp Attn: Sentry Credit, Inc POB 12070 Everett, WA 98206							28,135.00
ACCOUNT NO. 7933			Possible personal liability for business expense				
American Express POB 6618 Omaha, NE 68105							10,065.00
ACCOUNT NO. 2101			Condo fess				
Aventura Beach Club Attn: The Continental Group POB 229030 Hollywood, FL 33022							unknown
ACCOUNT NO. 9908			Credit Card				
Bank Of America Attn: Associated Recovery Systems POB 469046 Escondido, CA 92046	0						4,927.00
			<u> </u>	Sub	tot?		4,321.00
3 continuation sheets attached			(Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St	is p T als	age Fota o o	e) al n	\$ 43,127.00

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IN RE Calero, Francisco & Calero, Sylvia

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Debtor(s)

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(If known)

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

		(Continuation Sneet)				
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. 4150	+		Possible personal liability for business expense			╡	
Bank of America Attn: Asset Acceptance POB 1630 Warren, MI 48090							37,236.00
ACCOUNT NO. 3299			Possible personal liability for business expense				,
Bank Of America Attn: Mercantile Adjustment Bureau, LLC POB 9016 Williamsville, NY 14231							445 259 00
ACCOUNT NO. 8988	+		Possible personal liability for business expense			-	145,258.00
BP POB 70887 Charlotte, NC 28272	-		, , , , , , , , , , , , , , , , , , ,				2,286.00
ACCOUNT NO. 6210	+		Possible personal liability for business expense			╈	_,
Capital One Bank (USA), N.A. Attn: Pressler & Pressler 7 Entin Rd. Parsippany, NJ 07054	-						8,539.74
ACCOUNT NO. 7247			Credit Card				
Chase Bank USA Attn: NAFS POB 9027 Willimasville, NY 14231							13,443.00
ACCOUNT NO. 1852			Credit Card				
Citi Bank Attn: Asset Acceptance, LLC POB 2036 Warren, MI 48090							37,236.00
ACCOUNT NO. 7059	+		Credit Card			+	57,250.00
Discover Attn: United Recovery Systems POB 722929 Houston, TX 77272							10,330.00
Sheet no. $1 \text{ of } 3$ continuation sheets attached to				Sub			-
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age Fota	- F	\$ 254,328.74
			(Use only on last page of the completed Schedule F. Repor				

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

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IN RE Calero, Francisco & Calero, Sylvia

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Debtor(s)

Case No. ____

(If known)

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

		(Continuation Sheet)				
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. 1277			Credit Card				
Fia Card Services Attn: Hayt, Hayt & Landau LLC POB 500 Eatontown, NJ 07724							26,805.00
ACCOUNT NO. 3099			Credit Card				
HSBC Bank/Union Plus POB 97280 Portland, OR 97280							
							6,512.00
ACCOUNT NO. 4054			Credit Card				
HSBC/Atlantic Credit & Finanace Attn: John P. Frye, P.C. POB 13665 Roanoke, VA 24036							8,384.00
ACCOUNT NO. 1762			Credit Card				
Mastercard POB 17313 Baltimore, MD 21297							6,401.00
ACCOUNT NO. 736B			Possible personal liability for business expense				0,401.00
Small Business Administration Attn: Linebarger Goggan, Et. Al POB 3585 Houston, TX 77253							
7004			Dessible norsenal liebility for business sympose				33,794.56
ACCOUNT NO. 736A Small Business Administration Attn: Linebarger Goggan, Et. Al POB 3585 Houston, TX 77253			Possible personal liability for business expense				33,794.56
ACCOUNT NO. 736B	-		Possible personal liability for business expense	\vdash		$\left \cdot \right $	55,194.00
Small Business Administration Attn: Linebarger Goggan, Et. Al POB 3585 Houston, TX 77253							44 800 00
Sheet no. 2 of 3 continuation sheets attached to				Sub	tot		44,800.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if ampliable on the S	is p T t als	age Fota o o	e) al n	<u>\$</u> 160,491.12

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

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

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. 0932			Credit Card				
The Home Depot POB 6497 Sioux Falls, SD 57117							6,278.00
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.				Π			
ACCOUNT NO.				ΙĪ			
Sheet no. <u>3 of</u> <u>3 continuation sheets attached to</u>			/TF + 1 - 6-4	Sub	tota	1	\$ 6,278.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th			- 1	\$ 6,278.00
			(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 atis	tica	n ıl	\$ 464,224.86