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Case 14-26384-MBK Doc 1 Filed 08/08/14 Entered 08/08/14 12:49:40 Desc Main B1 (Official Form 1) (04/13) Document Page 1 of 7

United Sta Distr	ntes Bankr rict of New						Volu	untary Petition
Name of Debtor (if individual, enter Last, First, Midd Constantino's Bella Salon, LLC	lle):		Name of Jo	Name of Joint Debtor (Spouse) (Last, First, Middle):				
All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names): Constantino's Bella Salon	rs					e Joint Debtor in trade names)		years
Last four digits of Soc. Sec. or Individual-Taxpayer I (if more than one, state all): 46-3000972	.D. (ITIN) /Com	plete EIN	Last four d			or Individual-T	axpayer I.D	D. (ITIN) /Complete EIN
Street Address of Debtor (No. & Street, City, State & 647 Route 18 South East Brunswick, NJ	z Zip Code):		Street Add	ress of Jo	int Deb	tor (No. & Stree	et, City, Sta	te & Zip Code):
East Divilswick, NJ	ZIPCODE 088	316					2	ZIPCODE
County of Residence or of the Principal Place of Bust		<u> </u>	County of	Residence	e or of the	he Principal Plac	ce of Busin	ess:
Mailing Address of Debtor (if different from street ad	ldress)		Mailing A	ddress of	Joint De	ebtor (if differen	nt from stree	et address):
ZIPCODE							2	ZIPCODE
Location of Principal Assets of Business Debtor (if d		eet address	above):					
647 Route 18 South, East Brunswick, N	J						7	ZIPCODE 08816
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.) ———————————————————————————————————	Single As U.S.C. § Railroad Stockbrok Commodi Clearing I Other Debtor is Title 26 o Internal R	ter tty Broker Bank Tax-Exem theck box, i a tax-exem f the United evenue Cod Check on Debtor Check if:	ne box.) state as defined i npt Entity f applicable.) pt organization d States Code (tde). e box: is a small busin is not a small b	under he ness debto susiness d	Chap Chap	the Petition napter 7 napter 9 napter 11 napter 12 napter 13 bets are primaril ots, defined in 1 01(8) as "incurr lividual primaril rsonal, family, or d purpose." pter 11 Debtors fined in 11 U.S.0 s defined in 11 U.S.0	n is Filed (Chap Reco Main Chap Reco Nonn Nature of 1 (Check one y consumen 1 U.S.C. red by an y for a r house- C. § 101(5) J.S.C. § 10 debts owed to	box.) Debts are primarily business debts. 1D). 1(51D). Debts are primarily business debts.
except in installments. Rule 1006(b). See Official Form 3A. Thins \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). 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).					re classes of creditors, in			
Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.								
Estimated Number of Creditors		l- 1		25,001- 50,000		50,001- 100,000	Over 100,000	
			\$50,000,001 to \$100 million	\$100,00 to \$500			More than \$1 billion	
Estimated Liabilities So to \$50,001 to \$100,001 to \$500,001 to \$1,0 \$50,000 \$100,000 \$500,000 \$1 million \$10			\$50,000,001 to	\$100,00 to \$500		\$500,000,001 to \$1 billion	More than	

Case 14-26384-MBK Doc 1 Filed 08/08/ B1 (Official Form 1) (04/13) Document	14 Entered 08/08/14 1 Page 2 of 7	12:49:40 Desc Main Page 2
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Constantino's Bella Salon, I	
All Prior Bankruptcy Case Filed Within Las	at 8 Years (If more than two, attac	ch 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	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.) Exhibit A is attached and made a part of this petition.	(To be completed whose debts are properties I, the attorney for the petitioner in that I have informed the petition chapter 7, 11, 12, or 13 of tittexplained the relief available unthat I delivered to the debtor the	if debtor is an individual rimarily consumer debts.) mamed in the foregoing petition, declare mer that [he or she] may proceed under the 11, United States Code, and have der each such chapter. I further certify notice required by 11 U.S.C. § 342(b).
	Signature of Attorney for Debtor(s)	Date
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	alleged to pose a threat of minimen	t and identifiable narm to public health
(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	•	ch a separate Exhibit D.)
If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attach	ned a made a part of this petition.	
	0 days than in any other District. partner, or partnership pending in t lace of business or principal assets but is a defendant in an action or pro-	this District. in the United States in this District, occeding [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 th	nat obtained judgment)	
(Address of	of landlord)	
Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for pos	ssession, after the judgment for poss	session was entered, and
□ Debtor has included in this petition the deposit with the court of filing of the petition. □ Debtor certifies that he/she has served the Landlord with this cert	•	iring the 30-day period after the

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(04/13)	Document	Page 3 of 7
		Name of Dobtor(s)

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VA	liinfarv	Petition
V V	iuiitai v	1 CHUUH

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

Name of Debtor(s):

Constantino's Bella Salon, LLC

Signatures

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

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

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

ney)

Signature of a Foreign Representative

Page 3

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.

ame of Foreign Representative

Signature of Attorney*

X /s/ Robert C Nisenson

Signature of Attorney for Debtor(s)

Robert C Nisenson 6680 Robert C. Nisenson LLC 08816

Rnisenson@aol.com

August 8, 2014

Date

Date

*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.

	s/ Constantino Bovino, Jr. ignature of Authorized Individual
	Constantino Bovino, Jr.
Pı	rinted Name of Authorized Individual

Member

Title of Authorized Individual

August 8, 2014

Date

Signature of Non-Attorney Petition Preparer

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

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

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

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

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

B4 (Official Form 4) (12/6/384-MBK

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United States Bankruptcy Court District of New Jersey

IN RE:	Case No
Constantino's Bella Salon, LLC	Chapter 11
Debtor(s)	•

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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).

(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)
Capital For Merchants 250 Stephenson Troy, MI 48083			Disputed	56,400.00 Collateral: 0.00 Unsecured: 56,400.00
CV Summerhill, LLC 900 Route 9 North, Suite 301 Woodbridge, NJ 07095				50,000.00
Pearl Capital 40 Exchange Place New York, NY 10005				28,000.00 Collateral: 0.00 Unsecured: 28,000.00

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] [or a member or an authorized agent of the partnership] named as the debtor in this case, 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:	August 8, 2014	Signature:	/s/ Constantino Bovino, Jr.
		· ·	

Constantino Bovino, Jr., Member

(Print Name and Title)

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Desc Main

IN RE Constantino's Bella Salon, LLC

Debtor(s)

Case No. (If known)

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.	Х			T		Х	56,400.00	56,400.00
Capital For Merchants 250 Stephenson Troy, MI 48083								
			VALUE \$					
ACCOUNT NO.	Х		secured				28,000.00	28,000.00
Pearl Capital 40 Exchange Place New York, NY 10005								
			VALUE \$					
ACCOUNT NO.				T	T	Х	0.00	
Periodic Licensing 38230 Fairway Court Clinton Township, MI 48038								
			VALUE \$					
ACCOUNT NO.								
				ŀ	l			
			VALUE \$	L				
0 continuation sheets attached			(Total of t	Sul his p			\$ 84,400.00	\$ 84,400.00
			/II		Tota		\$ 84,400.00	\$ 84,400.00
			(Use only on l	ast j	oage	;)	\$ 84,400.00	5 04,400.00

(Report also on Summary of Schedules.)

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

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IN RE Constantino's Bella Salon, LLC

Case No.

Debtor(s)

(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 "Disputed." (You may need to place an "X" in more than one of these three columns.)

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.

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 \$12,475* 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).								
Claims of certain farmers and fishermen, up to \$6,150* 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 \$2,775* 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 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.								
0 continuation sheets attached								

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(If known)

Debtor(s)

Doc 1

Case No.

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.	Х		Note				
CV Summerhill, LLC 900 Route 9 North, Suite 301 Woodbridge, NJ 07095							50,000.00
ACCOUNT NO.							
ACCOUNTING					<u> </u>		
ACCOUNT NO.							
ACCOUNT NO.							
0 continuation sheets attached	-	1	(Total of th	Subt	otal	1	50,000.00
			(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 Relate	also atist	tical	1 1	5 0,000.00