### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 1 of 78

B1 (Official Form 1)(4/10)									
United .		s Bank rict of No	ruptcy ( evada	Court				Voluntary	Petition
Name of Debtor (if individual, enter Last, Fin Cabucana, Eugenia Bartolome	st, Middle)	:		Name	of Joint Do	ebtor (Spouse)	(Last, First,	Middle):	
All Other Names used by the Debtor in the la (include married, maiden, and trade names):	st 8 years					used by the Jo maiden, and t		in the last 8 years	
Last four digits of Soc. Sec. or Individual-Ta: (if more than one, state all)  xxx-xx-8407	payer I.D.	(ITIN) No./	Complete EIN	Last for	our digits o	f Soc. Sec. or all)	Individual-7	Гахрауег I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. and Street, City 3709 Liliy Haven Ave Las Vegas, NV	, and State	):		Street	Address of	Joint Debtor (	(No. and Str	reet, City, and State):	
		Г	ZIP Code <b>89120</b>						ZIP Code
County of Residence or of the Principal Place Clark	of Busines		00.20	Count	y of Reside	ence or of the I	Principal Pla	ace of Business:	1
Mailing Address of Debtor (if different from	street addre	ss):		Mailir	ng Address	of Joint Debto	or (if differen	nt from street address):	
		Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Deb (if different from street address above):	tor								l
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 entitic check this box and state type of entity below.)  Filing Fee (Check one by Full Filing Fee to be paid in installments (applicable)	Sing in 1 Rai Stor Core Core Core Core Core Core Core Co	(Checl alth Care Bu gle Asset Ro 11 U.S.C. § Iroad ckbroker mmodity Br aring Bank iter  Tax-Exe (Check box otor is a tax- der Title 26 of de (the Inter	eal Estate as of 101 (51B)  oker  empt Entity c, if applicable) exempt organof the United nal Revenue of the United National Revenue of the Uni	nization States Code). ne box: btor is a si	defined "incuri a perso	the Potent 7 er 9 er 11 er 12 er 13 er 13 er primarily cord in 11 U.S.C. § er d by an individent, family, or h  Chapt d debtor as define	Close Nature (Check nsumer debts, 101(8) as dual primarily nousehold pur ter 11 Debte ded in 11 U.S.6	busin for pose."	decognition eding decognition
□ Filing Fee to be paid in installments (applicable attach signed application for the court's conside debtor is unable to pay fee except in installmen Form 3A.      □ Filing Fee waiver requested (applicable to chap attach signed application for the court's considerable to court's conside	ration certify ss. Rule 1006 ter 7 individu	ing that the b(b). See Office that only). Mu	check in De are Check all	btor's agg less than applicable	\$2,343,300 ( e boxes: ng filed with	amount subject this petition.	to adjustment	luding debts owed to insi on 4/01/13 and every thr	ee years thereafter).
Statistical/Administrative Information  ☐ Debtor estimates that funds will be availal  ☐ Debtor estimates that, after any exempt puthere will be no funds available for distributions.	operty is ex	cluded and	in in a	itors.	e with 11 U.S	S.C. § 1126(b).	•	SPACE IS FOR COURT	
Estimated Number of Creditors	1,000- 5,000	5,001- 10,000	10,001-	] 25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets  Story S50,000 \$50,001 to \$500,001 to \$100,001 to \$100,001 to \$100,001 to \$100,001 to \$100,001 to \$100,001 to \$100,000 to	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 S to \$100 t	] 5100,000,001 o \$500 nillion	\$500,000,001 to \$1 billion				
Estimated Liabilities	\$1,000,001 to \$10	\$10,000,001 to \$50		3 6100,000,001 0 \$500	\$500,000,001 to \$1 billion				

Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 2 of 78

B1 (Official For	III 1)(4/10)		rage 2	
Voluntar	y Petition	Name of Debtor(s): Cabucana, Eugenia Bartolome		
(This page mu	st be completed and filed in every case)			
T	All Prior Bankruptcy Cases Filed Within Last			
Location Where Filed:	- None -	Case Number:	Date Filed:	
Location Where Filed:		Case Number:	Date Filed:	
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more the	han one, attach additional sheet)	
Name of Debt	or:	Case Number:	Date Filed:	
District:		Relationship:	Judge:	
	Exhibit A		Exhibit B	
forms 10K a pursuant to S	eleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	(To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).		
☐ Exhibit	A is attached and made a part of this petition.	$\mathbf{X}_{-}$ /s/ Charles T. Wright N		
		Signature of Attorney for Debto Charles T. Wright NV N		
	Exh	ibit C		
l	or own or have possession of any property that poses or is alleged to	pose a threat of imminent and identifia	ble harm to public health or safety?	
☐ Yes, and ☐ No.	Exhibit C is attached and made a part of this petition.			
	Exh	ibit D		
_	leted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made and the petition:	•	h a separate Exhibit D.)	
☐ Exhibit	D also completed and signed by the joint debtor is attached a	nd made a part of this petition.		
	Information Regardin	=		
•	(Check any ap Debtor has been domiciled or has had a residence, principe days immediately preceding the date of this petition or for	al place of business, or principal as	sets in this District for 180	
	There is a bankruptcy case concerning debtor's affiliate, ge	6 1	•	
_	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	ipal place of business or principal in the United States but is a defen-	assets in the United States in dant in an action or	
	Certification by a Debtor Who Reside (Check all app		perty	
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checke	ed, complete the following.)	
	(Name of landlord that obtained judgment)			
	(Address of landlord)			
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f			
	Debtor has included in this petition the deposit with the coafter the filing of the petition.		•	
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(1	)).	

Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 3 of 78 B1 (Official Form 1)(4/10) Page 3 Name of Debtor(s): **Voluntary Petition** Cabucana, Eugenia Bartolome (This page must be completed and filed in every case) Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition petition is true and correct. is true and correct, that I am the foreign representative of a debtor in a foreign If petitioner is an individual whose debts are primarily consumer debts and proceeding, and that I am authorized to file this petition. has chosen to file under chapter 7] I am aware that I may proceed under (Check only one box.) chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief ☐ I request relief in accordance with chapter 15 of title 11. United States Code. available under each such chapter, and choose to proceed under chapter 7. Certified copies of the documents required by 11 U.S.C. §1515 are attached. [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). ☐ 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 I request relief in accordance with the chapter of title 11, United States Code, recognition of the foreign main proceeding is attached. specified in this petition. X /s/ Eugenia Bartolome Cabucana Signature of Foreign Representative Signature of Debtor Eugenia Bartolome Cabucana Printed Name of Foreign Representative Signature of Joint Debtor Date Telephone Number (If not represented by attorney) Signature of Non-Attorney Bankruptcy Petition Preparer April 9, 2010 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 Date compensation and have provided the debtor with a copy of this document Signature of Attorney\* 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 X /s/ Charles T. Wright NV chargeable by bankruptcy petition preparers, I have given the debtor notice Signature of Attorney for Debtor(s) 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. Charles T. Wright NV No.10285 Official Form 19 is attached. Printed Name of Attorney for Debtor(s) Piet & Wright Printed Name and title, if any, of Bankruptcy Petition Preparer Firm Name 3130 S. Rainbow Blvd., Suite 304 Las Vegas, NV 89146 Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition Address preparer.)(Required by 11 U.S.C. § 110.) d@pletwright.com, tiffany@pietwright.com, stephanie@pietwright.com (702) 566-1212 Fax: (702) 566-4833 Telephone Number April 9, 2010 Address 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. Date Signature of Debtor (Corporation/Partnership) Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. 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 Names and Social-Security numbers of all other individuals who prepared or on behalf of the debtor. assisted in preparing this document unless the bankruptcy petition preparer is The debtor requests relief in accordance with the chapter of title 11, United not an individual: States Code, specified in this petition. Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

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.

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court District of Nevada

		District of Actaua		
In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor(s)	Chapter	11

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

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

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

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the 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.]

1D (Official Form 1, Exhibit D) (12/09) - Cont.	ge 2
☐ 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, of through the Internet.); ☐ Active military duty in a military combat zone.	)r
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement 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/ Eugenia Bartolome Cabucana Eugenia Bartolome Cabucana	
Date: April 9, 2010	

B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

## UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 8 of 78

B 201B (Form 201B) (12/09)

### United States Bankruptcy Court District of Nevada

	District of Nevada							
In re	Eugenia Bartolome Cabucana		Case No.					
		Debt	or(s) Chapter	11				
Code.	CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE  Certification of Debtor  I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy							
Euger	nia Bartolome Cabucana	X	/s/ Eugenia Bartolome Cabucai	na	April 9, 2010			
Printed	d Name(s) of Debtor(s)		Signature of Debtor		Date			
Case N	No. (if known)	X						
			Signature of Joint Debtor (if any)		Date			

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**B4** (Official Form 4) (12/07)

### **United States Bankruptcy Court District of Nevada**

In re	Eugenia Bartolome Cabucana			
		Debtor(s)	Chapter	11

#### 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; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Bac Home Loans Servici 450 American St Simi Valley, CA 93065	Bac Home Loans Servici 450 American St Simi Valley, CA 93065	Rental: Residential Location: 1518 Starlight Canyon Ave. Las Vegas, NV 89183		358,582.00 (280,000.00 secured)
Bank of America Home Loans 1518 Starlight Canyon Ave. Las Vegas, NV 89183	Bank of America Home Loans 1518 Starlight Canyon Ave. Las Vegas, NV 89183	Rental: Residential Location: 1518 Starlight Canyon Ave. Las Vegas, NV 89183		115,484.25 (280,000.00 secured) (358,582.00 senior lien)
Bashir A. Chowdhry, MD 4180 South Pecos Dr. Ste 175 Las Vegas, NV 89121	Bashir A. Chowdhry, MD 4180 South Pecos Dr. Ste 175 Las Vegas, NV 89121	Medical		7,772.33
Cardiovasc & Thoracic Surgeons 4180 S. Pecos Suite 175 Las Vegas, NV 89121-5076	Cardiovasc & Thoracic Surgeons 4180 S. Pecos Suite 175 Las Vegas, NV 89121-5076	Medical		6,554.72
Cardiovascular & Thoracic Surgery 4180 S. Pecos Road Las Vegas, NV 89121	Cardiovascular & Thoracic Surgery 4180 S. Pecos Road Las Vegas, NV 89121	Medical		7,683.40
Citifinancial Retail S Po Box 499 Hanover, MD 21076	Citifinancial Retail S Po Box 499 Hanover, MD 21076	ChargeAccount		4,569.00
CITIFINANCIAL RETAIL SERVICES PO BOX 22060 TEMPE, AZ 85285	CITIFINANCIAL RETAIL SERVICES PO BOX 22060 TEMPE, AZ 85285	Credit Card		4,498.17
Dillard's American Express Card PO BOX 960012 ORLANDO, FL 32896	Dillard's American Express Card PO BOX 960012 ORLANDO, FL 32896	Credit Card		1,717.56

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Eugenia Bartolome Cabucana	Case No.	
	Debtor(s)	·	

### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
DSI Las Vegas Rental PO BOX 3752	DSI Las Vegas Rental PO BOX 3752	Medical		5,753.37
Johnson City, TN 37602 Fresenius Medical Care-North America 1750 S Mesa Drive Suite 100 Mesa, AZ 85210	Johnson City, TN 37602  Fresenius Medical Care-North America 1750 S Mesa Drive Suite 100 Mesa, AZ 85210	Medical		3,182.31
Gemb/Dillards Dc Po Box 981402 El Paso, TX 79998	Gemb/Dillards Dc Po Box 981402 El Paso, TX 79998	ChargeAccount		1,717.00
Internal Revenue Service ACS Support PO BOX 24017 Fresno, CA 93888-0500	Internal Revenue Service ACS Support PO BOX 24017 Fresno, CA 93888-0500	Income Tax		72,308.04
Midland Credit Mgmt 8875 Aero Dr San Diego, CA 92123	Midland Credit Mgmt 8875 Aero Dr San Diego, CA 92123	Collection Ge Money Bank		4,690.00
Sams Club PO BOX 960013 ORLANDO, FL 32896	Sams Club PO BOX 960013 ORLANDO, FL 32896	Store Card		4,690.02
Sears Credit Cards PO BOX 6937 The Lakes, NV 88901	Sears Credit Cards PO BOX 6937 The Lakes, NV 88901	Sears Charge		5,668.27
UMC P.O. Box 58563 Las Vegas, NV 89193	UMC P.O. Box 58563 Las Vegas, NV 89193	Medical Bill		8,494.89
Wachovia 309 La Rue Court Las Vegas, NV 89145	Wachovia 309 La Rue Court Las Vegas, NV 89145	Rental: Residential and Group Home for Alzheimer's Location: 309 La Rue Crt. Las Vegas, NV 89145		255,853.84 (160,000.00 secured)
Wells Fargo Card Services PO BOX 30086 Los Angeles, CA 90030	Wells Fargo Card Services PO BOX 30086 Los Angeles, CA 90030	Credit Card		13,049.26
Wfb Cd Svc P.O. Box 5445 Portland, OR 97208	Wfb Cd Svc P.O. Box 5445 Portland, OR 97208	ChargeAccount		13,049.00
ZALES - GORDONS Des Moines, IA 50364	ZALES - GORDONS Des Moines, IA 50364	Store Card		1,752.20

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Eugenia Bartolome Cabucana	Case No.	
	Debtor(s)	-	

#### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, **Eugenia Bartolome Cabucana**, 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	April 9, 2010	Signature	/s/ Eugenia Bartolome Cabucana	
			Eugenia Bartolome Cabucana	
			Debtor	

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

B6 Summary (Official Form 6 - Summary) (12/07)

### United States Bankruptcy Court District of Nevada

In re	Eugenia Bartolome Cabucana		Case No	
-		Debtor		
			Chapter	11

#### **SUMMARY OF SCHEDULES**

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

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	440,000.00		
B - Personal Property	Yes	3	9,080.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		729,920.09	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		72,308.04	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	29		109,809.27	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			3,500.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			4,577.00
Total Number of Sheets of ALL Schedu	ıles	41			
	To	otal Assets	449,080.00		
		'	Total Liabilities	912,037.40	

Form 6 - Statistical Summary (12/07)

### United States Bankruptcy Court District of Nevada

In re	Eugenia Bartolome Cabucana		Case No.	
-		Debtor	••	
			Chapter	11

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

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

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

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

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

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	72,308.04
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	72,308.04

#### State the following:

Average Income (from Schedule I, Line 16)	3,500.00
Average Expenses (from Schedule J, Line 18)	4,577.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	3,500.00

#### State the following:

		_
Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		289,920.09
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	72,000.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		308.04
4. Total from Schedule F		109,809.27
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		400,037.40

#### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 14 of 78

B6A (Official Form 6A) (12/07)

Las Vegas, NV 89145

In re	Eugenia Bartolome Cabucana	Case No	Case No.
_		Debtor	

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Rental: Residential Location: 1518 Starlight Canyon Ave. Las Vegas, NV 89183	Rental Property	-	280,000.00	474,066.25
Rental: Residential and Group Home for Alzheimer's Location: 309 La Rue Crt.	Rental Property	-	160,000.00	255,853.84

Sub-Total > 440,000.00 (Total of this page)

Total > **440,000.00** 

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Eugenia Bartolome Cabucana	Case No.	
_		Debtor	

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply 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).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial	Wells	Fargo Checking Account (1718)	-	500.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Bank	of America (Opened in Nov 2009)	-	80.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Gener	al household furniture	-	5,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Misc I	nousehold items	-	3,000.00
6.	Wearing apparel.	X			
7.	Furs and jewelry.	Jewel	ry	-	500.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
				Sub-Tota	al > 9,080.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

_		
In re	Eugenia Bartolome Cabucana	Case No.
	•	

Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

				** * -	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	x			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			T)	Sub-Total of this page)	al > <b>0.00</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Eugenia Bartolome Cabucana	Case No.

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 0.00
(Total of this page)

cu

Total >

9,080.00

B6C (Official Form 6C) (4/10)

In re	Eugenia Bartolome Cabucana	Case No	
_		, Debtor	

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereaft
□ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
■ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Co	ertificates of Deposit		
Wells Fargo Checking Account (1718)	Nev. Rev. Stat. § 21.090(1)(z)	500.00	500.00
Bank of America (Opened in Nov 2009)	Nev. Rev. Stat. § 21.090(1)(z)	80.00	80.00
Household Goods and Furnishings General household furniture	Nev. Rev. Stat. § 21.090(1)(b)	5,000.00	5,000.00
Books, Pictures and Other Art Objects; Collectibles Misc household items	Nev. Rev. Stat. § 21.090(1)(a)	3,000.00	3,000.00
<u>Furs and Jewelry</u> Jewelry	Nev. Rev. Stat. § 21.090(1)(a)	500.00	500.00

Total: 9,080.00 9,080.00

RAD A	Official	Form	(D)	(12/07)
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In re	Eugenia Bartolome Cabucana	Case No.	
_		Debtor	

#### 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.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, 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 "Unliquidated". (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" 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" 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.

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.)	C C D E B T C R	A W	DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	LIQ	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxx9154  Bac Home Loans Servici 450 American St Simi Valley, CA 93065		-	Opened 8/16/05 Last Active 12/24/09  First Mortgage  Rental: Residential Location: 1518 Starlight Canyon Ave. Las Vegas, NV 89183  Value \$ 280,000.00		E D		358,582.00	78,582.00
Account No. xxxxx2053  Bank of America Home Loans 1518 Starlight Canyon Ave. Las Vegas, NV 89183		-	Rental: Residential Location: 1518 Starlight Canyon Ave. Las Vegas, NV 89183  Value \$ 280.000.00				445 404 05	445 404 05
Account No. xxxxxx4908  Wachovia 309 La Rue Court Las Vegas, NV 89145		-	Value \$ 280,000.00  Mortgage  Rental: Residential and Group Home for Alzheimer's Location: 309 La Rue Crt. Las Vegas, NV 89145  Value \$ 160,000.00				115,484.25 255,853.84	95,853.84
Account No.			Value \$					
continuation sheets attached				Sub			729,920.09	289,920.09
			(Report on Summary of So		ota lule	· I	729,920.09	289,920.09

B6E (Official Form 6E) (4/10)

•				
In re	Eugenia Bartolome Cabucana		Case No.	
-		Debtor ,		

#### 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 he 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 disclose the child's name. See, 11 U.S.C. §112 and Fed. κ. βαίκτ. Ρ. 1007(iii).

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 lab
"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 priorit 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 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 relation 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 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 sale 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 busine 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 Federa 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).

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/10) - Cont.

In re	Eugenia Bartolome Cabucana		Case No.	
-		Debtor	,	

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NL I QUI DATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) 2001-2006 Account No. xxx-xx-8407 Income Tax Internal Revenue Service 308.04 **ACS Support** PO BOX 24017 Fresno, CA 93888-0500 72,308.04 72,000.00 Account No. Account No. Account No. Account No. Subtotal 308.04 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 72,308.04 72,000.00 308.04 (Report on Summary of Schedules) 72,308.04 72,000.00

#### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 22 of 78

B6F (Official Form 6F) (12/07)

In re	Eugenia Bartolome Cabucana		Case No.
_		Debtor	

#### 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 claims to report on this Schedule F.

			<u>r</u>				
CREDITOR'S NAME,	CO	Ηι	sband, Wife, Joint, or Community	CC	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	CONTINGENT	Q	SPUT	AMOUNT OF CLAIM
Account No. xxxx51N1			Opened 12/01/08 Last Active 3/01/08	T N	DATED		
			GovernmentSecuredDirectLoan Urology		Ď		
Acct Corp			Special				
Acctcorp Of Southern Nevada 4955 S		-					
Dura							
Las Vegas, NV 89113							444.00
							141.00
Account No.							
Advanced							
		-					
							0.00
							0.00
Account No. x0475			Medical				
advanced Heart Associates							
2470 E. Flamingo Road Suites A & B		-					
Las Vegas, NV 89121							
243 Vegas, NV 03121							149.04
Account No. xxxxx5089		$\vdash$	Collection- Medical	+			
	1						
AMCA							
PO Box 1235		-					
Elmsford, NY 10523-0935							
							11.28
00				Sub	ota	1	204.22
<b>_28</b> _ continuation sheets attached			(Total of	this	pag	ge)	301.32

In re	Eugenia Bartolome Cabucana	Case No	
		Debtor	

	С	Hu	sband, Wife, Joint, or Community	Тс	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZHLZGWZH	Q	SPUTED	AMOUNT OF CLAIM
Account No. xxxxx3050			Medical	7	E		
American Medical Response-Nevada PO Box 3429 Modesto, CA 95353		-			В		1,021.37
Account No. xxx2600	╁	-	Opened 5/06/08	+	┝	<u> </u>	,
Armada Cor 93 Eastmont Ave Suite #100 East Wenatchee, WA 98802		-	Collection Med1 02 Retina Consu				
				$\perp$			199.00
Account No. xxxxx1789  Associated Pathologists Chartered P.O. Box 79074 Phoenix, AZ 85062		-	Medical				18.79
Account No. xxxxx5089	1		Medical	+			
Associated Pathologists Chartered P.O. Box 79074 Phoenix, AZ 85062		-					11.28
Account No. xxxxxx0742	╁	$\vdash$	Medical	+	+	$\vdash$	
Associated Pathologists Chartered P.O. Box 79074 Phoenix, AZ 85062		-					4.52
Sheet no1 of _28_ sheets attached to Schedule of		1		Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	1,254.96

In re	Eugenia Bartolome Cabucana	Case No	
		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BT OR	J H H	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZL-QD-DAFED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxx2053			Opened 8/16/05 Last Active 1/07/09	T	T E		
Bac Home Loans Servici 450 American St Simi Valley, CA 93065		-	Mortgage		D		Unknown
Account No. xxxx0561  Bac Home Loans Servici 450 American St Simi Valley, CA 93065		-	Opened 2/10/03 Last Active 8/01/03 Mortgage				0.00
							0.00
Account No. xxxx4228  Bac Home Loans Servici 450 American St Simi Valley, CA 93065		-	Opened 11/20/03 Last Active 5/01/04 Mortgage				0.00
Account No. xxxxx9154							
Bank of America Home Loans PO BOX 515503 Los Angeles, CA 90051		-					Unknown
Account No. xx0779			Medical		H	H	
Bashir A. Chowdhry, MD 4180 South Pecos Dr. Ste 175 Las Vegas, NV 89121		_					7,772.33
Sheet no. 2 of 28 sheets attached to Schedule of				Subt	ota	1	7 770 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	7,772.33

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	CODEBTOR	Н	DATE CLAIM WAS INCURRED AND	HZOO	טבטרמט-ו	S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	W J	CONSIDERATION FOR CLAIM. IF CLAIM	i N	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	Ö	c	IS SUBJECT TO SETOFF, SO STATE.	NGEN	Ĭ	Ė	AMOUNT OF CLAIM
Account No. xxxx5262			Medical	N	DATED	١	
ACCOUNT TO. ARRACECE			inculous and a second s		E D		
Bioscrip Pharmacy					П		1
14847 Collections Cnt Dr		-					
Chicago, IL 60693							
							80.26
Account No. xxxx4946			Medical				
Brian E Lee MD LTD							
Brian E. Lee, MD, LTD PO BOX 621406		l <u>.</u>					
Las Vegas, NV 89162							
							190.89
Account No. xx0779			Medical	П			
Cardiovasc & Thoracic Surgeons							
4180 S. Pecos Suite 175 Las Vegas, NV 89121-5076		-					
Las vegas, NV 69121-5076							
							6,554.72
Account No. xx0779			Medical	Н			0,334.72
Account No. XXVII 9			Medical				
Cardiovascular & Thoracic Surgery							
4180 S. Pecos Road		-					
Las Vegas, NV 89121							
							7,683.40
Account No. xxx2944			Medical				
Center for Lunt Diseases							
Center for Lunf Diseases PO BOX 98898 Dr #1003		L					
Las Vegas, NV 89193							
Las regas, itr 03 130							
							258.42
Sheet no. <b>3</b> of <b>28</b> sheets attached to Schedule of				Subt	ota	1	4470700
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his į	pag	e)	14,767.69

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

	10	1	L LWG Live O	10		<u> </u>	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxx5009			Opened 11/07/03 Last Active 11/01/04	Т	E		
Chase 201 N Walnut St # De1-10 Wilmington, DE 19801		-	Automobile		D		0.00
Account No. xxxx0746	╂	_	Opened 2/10/03 Last Active 4/01/03	+	_	<u> </u>	
Chase 10790 Rancho Bernardo Rd San Diego, CA 92127		-	Mortgage				0.00
Account No. xxxxxxxxx0807	t		Opened 6/23/05 Last Active 7/14/06				
Chase Po Box 1093 Northridge, CA 91328	-	-	Mortgage				0.00
Account No. xxxxxxxxx3837			Opened 1/07/94 Last Active 11/11/04				
Chase Po Box 1093 Northridge, CA 91328		-	Mortgage				0.00
Account No. xxxxxxxxxxx4306	L		Opened 12/12/97 Last Active 10/02/02		$\vdash$		
Chase/Cc Po Box 15298 Wilmington, DE 19850		-					0.00
Sheet no. 4 of 28 sheets attached to Schedule of		_	<u> </u>	Sub	l tota	<u>1</u> ւ1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				0.00

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	J H H		CONTINGENT		SPUTED	AMOUNT OF CLAIM
Account No. xx1168			Opened 7/01/00 Last Active 11/01/01	] Τ	T E		
Chevron Pob 5010 Room 1242 Concord, CA 94524		-	CreditCard		D		0.00
Account No. xxxxxxxxxxxx0380			Opened 8/18/99				
Citifinancial 3220 E Flamingo Rd Ste C Las Vegas, NV 89121		-					0.00
			0 1 0//0/00				0.00
Account No. xxxxxxxxxxxxx8720  Citifinancial 3035 N Rainbow Blvd Las Vegas, NV 89108		-	Opened 8/18/99				Unknown
Account No. xxxxxxxxxxxx8360			Opened 11/01/06 Last Active 2/01/09				
Citifinancial Retail S Po Box 499 Hanover, MD 21076		-	ChargeAccount				4,569.00
Account No. xxxxxxxxxxxx0281			Credit Card		Г	Г	
CITIFINANCIAL RETAIL SERVICES PO BOX 22060 TEMPE, AZ 85285		-					4,498.17
Sheet no. <u>5</u> of <u>28</u> sheets attached to Schedule of		_		Subt	ota	1	0.007.47
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	9,067.17

In re	Eugenia Bartolome Cabucana	Case No	
		Debtor	

	С	Ни	sband, Wife, Joint, or Community	Тс	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXTLXGEXT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. x4254			Medical	7	T E		
Comprehensive Cancer Centers PO Box 911265 Dallas, TX 75391-1265		-			D		46.92
Account No. xxxxx-xxx7680			Medical	+			40.92
Consultants For Pathology 4607 Lakeview Canyon Dr Suite 418 Westlake Village, CA 91361		  -					
Account No. xxxxx-xxx3484	_		Medical	4			115.03
Consultants For Pathology 4607 Lakeview Canyon Dr Suite 418 Westlake Village, CA 91361		-					124.25
Account No. xxxx1460			Medical Collection	+			
Consumer debt Services, LLC PO BOX 714017 Columbus, OH 43271-4017		-					72.55
Account No. xxx4861			Medical	+			
Critical Care Consultants PO BOX 98898 Las Vegas, NV 89193		_					94.87
Sheet no. 6 of 28 sheets attached to Schedule of				Sub	l tota	<u> </u> .l	
Creditors Holding Unsecured Nonpriority Claims			(Total of				453.62

In re	Eugenia Bartolome Cabucana	Case No	
-		Debtor ,	

				_	_	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C O N T	DZLLQD-1	P	
MAILING ADDRESS	Ď	н		Ň	Ľ	s	
INCLUDING ZIP CODE,	E	w	DATE CLAIM WAS INCURRED AND	T	١	P	
AND ACCOUNT NUMBER	Ť	J	CONSIDERATION FOR CLAIM. IF CLAIM	N	ŭ	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	CODEBTOR	С	IS SUBJECT TO SETOFF, SO STATE.	NGEN	l I	E	
A	Ë		Madical	Ϊ́Τ	DATED		
Account No. xx1373			Medical	•	Ė		
<b>L</b>					۲	_	
DBA Anastasia Associates							
129 W. Lake Mead Pkwy., B18		-					
Henderson, NV 89015							
							33.79
Account No. xx xxx5465		H	Medical	$\vdash$	_		
Account No. AX AXXXXXX			inculcal				
Desert Radiologists							
		_					
3090 S. Durango		-					
Ste 200							
Las Vegas, NV 89117							
							126.55
Account No. xxxxxx-xDSRT			Medical	$\vdash$			
	l						
Desert Radiologists							
POB 3057		L					
Indianapolis, IN 46206							
							133.87
Account No. xxxxxx-xxxxx x2809			Medical				
Desert Radiology							
3920 S Eastern Ave		-					
Las Vegas, NV 89119							
							624.00
Account No.			Medical Bill	$\vdash$	$\vdash$	$\vdash$	
Account No.			imedical Bill				
Desert Springs Hospital							
		ا ـ ا			l	l	
Las Vegas, NV 89119						l	
					l	l	
				1		l	
							0.00
Sheet no7 of _28 sheets attached to Schedule of	•			Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	918.21

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

CREDITOR'S NAME,	c	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIGUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. x7719			Medical	T	T E		
Diabetic Care Network 3260 NW 23 Ave #800 Pompano Beach, FL 33069		-			D		90.00
Account No. xxxxxxxxxx4594			Credit Card				
Dillard's American Express Card PO BOX 960012 ORLANDO, FL 32896		-					
							1,717.56
Account No. xxxxO000			Medical				
Dr. Viren B. Patel, DO PC 4024 Manson Hall Court Las Vegas, NV 89129-3666		-					
							51.65
Account No. xx1342			Medical				
DSI Las Vegas Rental PO BOX 3752 Johnson City, TN 37602		-					5 750 07
				$\perp$			5,753.37
Account No. xxxx1244  EPMG/ST Rose Dominacan Hosp SA PO BOX 182554 Columbus, OH 43218-2554		_	Medical				101.35
Sheet no. <b>8</b> of <b>28</b> sheets attached to Schedule of			2	Sub	tota	1	7,713.93
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	1,713.33

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

	С	ни	sband, Wife, Joint, or Community	С	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		N L I Q U	S P	AMOUNT OF CLAIM
Account No. xxxx7626			Medical	Т	E		
Escallate LLC P.O. Box 710732 Columbus, OH 43271-0732		-			D		34,37
Account No. xxxx7627			Medical	+			
Escallate LLC P.O. Box 710732 Columbus, OH 43271-0732		-					34.37
Account No. xxxx7377			Medical	+	┢		34.37
Escallate LLC P.O. Box 710732 Columbus, OH 43271-0732		_					101.35
Account No. xxxxxxx3111			Medical		H		
Flamingo Emergancy Physician PO BOX 13901 Philadelphia, PA 19101-3901		_					93.34
Account No. xxxxxx9715			Medical	+	$\vdash$	$\vdash$	33.3.
Flamingo Emergancy Physician PO BOX 13901 Philadelphia, PA 19101-3901		-					93.34
Sheet no. 9 of 28 sheets attached to Schedule of				Sub			356.77
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CC	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZ1-QD-D4FED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6124			Opened 5/03/05 Last Active 2/14/06	Т	T E		
Frdf/Cbsd Po Box 6497 Sioux Falls, SD 57117		-	ChargeAccount		D		0.00
Account No. xxxxxxxxxxxx6124			Store Card				
FRED MEYER Des Moines, IA 50364		-					
							1,062.15
Account No. xx1342			Medical				
Fresenius Medical Care-North America 1750 S Mesa Drive Suite 100 Mesa, AZ 85210		-					3,182.31
Account No. xxxxxxxxxxxx2780			Opened 1/31/98 Last Active 10/22/02				
G Jwl/Cbsd Po Box 6497 Sioux Falls, SD 57117		-	ChargeAccount				0.00
Account No. <b>x1981</b>	-		Medical	$\vdash$		$\vdash$	
G.S. Chopra, CHTD PO BOX 33938 Las Vegas, NV 89133-3938		_					42.82
Sheet no. <b>10</b> of <b>28</b> sheets attached to Schedule of				Subt	ota	1	4 007 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	4,287.28

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	Ü	Þ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H H		CONTINGENT	OZL-GU-DAFED	SPUTED	AMOUNT OF CLAIM
Account No. xx1872			Medical	T	E		
Gastroenterology Center of Nevada 700 Shadow Lane Las Vegas, NV 89106-4158		-			D		164.30
Account No. xxxxxxxx2268			Opened 6/17/05 Last Active 7/22/05		Г		
Gemb/Banana Rep Po Box 981400 El Paso, TX 79998		-	ChargeAccount				0.00
Account No. xxxxxxxx1085			Opened 11/14/00 Last Active 5/24/02		H		
Gemb/Care Credit Po Box 981439 El Paso, TX 79998		-	ChargeAccount				0.00
Account No. xxxxxxxx1030			Opened 7/11/00		Н		
Gemb/Chevron 4125 Windward Plz Alpharetta, GA 30005		-	ChargeAccount				0.00
Account No. xxxxxxx9726		T	Opened 11/01/07		М	T	
Gemb/Dildc Po Box 981402 El Paso, TX 79998-1402		-	AttorneyFees				0.00
Sheet no11_ of _28_ sheets attached to Schedule of			S	Subt	ota	1	164.30
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	104.30

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

		_			_	_	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	Q	S P	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx3486			Opened 1/01/04 Last Active 1/01/08		E		
Gemb/Dilla Po Box 52005 Phoenix, AZ 85072		-	ChargeAccount				0.00
Account No. xxxxxxxxxxxx9713	H		Opened 1/01/98 Last Active 10/24/02		t	t	
Gemb/Dillards Po Box 981400 El Paso, TX 79998		_	ChargeAccount				0.00
Account No. xxxxxxxxxxxxx9612  Gemb/Dillards Po Box 981400 El Paso, TX 79998		-	Opened 1/02/04 Last Active 4/02/08 ChargeAccount				
					-		0.00
Account No. xxxxxxxx7264  Gemb/Dillards Dc Po Box 981402 El Paso, TX 79998		-	Opened 11/15/07 Last Active 4/01/09 ChargeAccount				1,717.00
Account No. xxxxxxxxxxxx5940	H	$\vdash$	Opened 11/15/07 Last Active 3/06/09	+	+	+	
Gemb/Dillards Dc Po Box 981402 El Paso, TX 79998		-	ChargeAccount				1,717.00
Sheet no12_ of _28_ sheets attached to Schedule of	-	_		Sub			3,434.00
Creditors Holding Unsecured Nonpriority Claims			(Total o	f this	pa	ge)	3,434.00

In re	Eugenia Bartolome Cabucana	Case No.	
_		Debtor ,	

	16	1		1.	1	1-	ı
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q	S P	AMOUNT OF CLAIM
Account Noxx6178			Opened 7/26/07 Last Active 2/15/08		E		
Gemb/Jcp Po Box 984100 El Paso, TX 79998		-	ChargeAccount		D		0.00
Account No. xxxxxxxx5134	┢		Opened 3/26/04 Last Active 9/26/04	$\dashv$	t	╁	
Gemb/Kinetico Po Box 981439 El Paso, TX 79998		-	ChargeAccount				
							0.00
Account No. xxxxxxxx1270  Gemb/Sams		-	Opened 11/01/03 Last Active 4/01/04 ChargeAccount				Unknown
Account No. xxxxxxxx1270	-		Opened 11/23/03 Last Active 7/08/07		+	-	Olikilowii
Gemb/Sams Club Po Box 981400 El Paso, TX 79998		_	ChargeAccount				0.00
Account No. xxxxxxxxxxx4092	-		Opened 8/02/07 Last Active 7/11/09		+	+	
Gemb/Sams Club Dc Po Box 981400 El Paso, TX 79998		-	ChargeAccount				0.00
Sheet no. 13 of 28 sheets attached to Schedule of	•			Sub	tot	al	0.00
Creditors Holding Unsecured Nonpriority Claims			(Total o	f this	pa	ge)	0.00

In ro	Eugania Partalama Cabusana	Case No.	
In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor,	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	Hu H W	DATE CLAIM WAS INCURRED AND	C O N T .	DZLLQDL	D I S P :	
AND ACCOUNT NUMBER (See instructions above.)		C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I N G E N	QU L DA	T E D	AMOUNT OF CLAIM
Account No. xxxxxxxx1873			Opened 11/07/96	] T	D A T E D		
Gemb/Sony			ChargeAccount		٢		
Po Box 981439 El Paso, TX 79998		-					
LI F 450, 1X 73330							
							Unknown
Account No. xxxxxxxx1004			Opened 6/26/00 Last Active 9/05/01				
Gemb/Whitehall			ChargeAccount				
Po Box 981439		-					
El Paso, TX 79998							
							0.00
Account No. xxxxxxxx2617			Opened 4/28/98	T			
Gemb/Whitehall			ChargeAccount				
Po Box 981439		-					
El Paso, TX 79998							
							Unknown
Account No. xxxxx5671			Opened 7/18/94 Last Active 7/01/02	T			
Gmac Mortgage			Mortgage				
Po Box 4622		-					
Waterloo, IA 50704							
							0.00
Account No. xxxxx3790			Opened 12/23/03 Last Active 4/15/05		Г		
Gmac Mortgage Llc			Mortgage				
3451 Hammond Ave		-					
Waterloo, IA 50702							
							0.00
Sheet no. <u>14</u> of <u>28</u> sheets attached to Schedule of		•		Subt			0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	0.30

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Z L L Q U L D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx1761			Opened 11/29/93	Т	T E		
Hawaii State Fcu Visa 560 Halekauwila St Honolulu, HI 96813		-			D		Unknown
Account No. xx6713			Medical				
Heart Center of Nevada 700 Shadow Lane #240 Las Vegas, NV 89106-4158		-					5,46
							5.40
Account No. xxxxO000  Infectious Diseases of S. Nevada 1228 Olivia Dr. Henderson, NV 89011	-	-	Medical				87.33
Account No. x8838  Kantor Nephrology Consultants 1750 E Desert Inn Rd #200 Las Vegas, NV 89169-3202		-	Unknown Medical				60.39
Account No.	f	H	Medical Bill		H		
Kindred Hospital Las Vegas - Flamingo Las Vegas, NV 89119		-					0.00
Sheet no. <b>15</b> of <b>28</b> sheets attached to Schedule of		•		Sub	tota	1	450.40
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	153.18

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

	1 ^	1		<u> </u>	1	1-	T
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q	S P	AMOUNT OF CLAIM
Account No. x8953			Medical	Т	E		
Lambert R. Abeyatunge, MD 2080 E. Flamongo Ste 310 Las Vegas, NV 89119		-			D		57.79
Account No. <b>x0462</b>			Medical	+		_	07.70
Las Vegas kidney Specialists LLP 7365 Prarie Falcon Rd Suite 140 Las Vegas, NV 89128		-					
-							204.98
Account No. 3507  Maxine Ingham, MD			Medical				
2756 N Green Vally Pkw 405 Henderson, NV 89014		-					46.23
Account No. xxx-x8316			Medical	+			10.20
Medicredit, Inc PO BOX 410917 Saint Louis, MO 63141		-					
Account No. <b>x3911</b>			Medical	$\downarrow$	L		182.45
Medschool Assoc South Dept of Surgery 1707 W. Charleston Blvd., #170 Las Vegas, NV 89102		-	INICUICAL				
				$\perp$			636.94
Sheet no. <u>16</u> of <u>28</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			1,128.39

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

					_		
CREDITOR'S NAME,	CC	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	OM-LVO-LVZC	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxx5986			Opened 10/29/09 Last Active 5/01/09	Т	T E		
Midland Credit Mgmt 8875 Aero Dr San Diego, CA 92123		-	Collection Ge Money Bank		D		4,690.00
Account No. xxx6910			Medical		Г		
Muhammad Ali Syed MD PC PO BOX 36670 Las Vegas, NV 89133-6670		-					
							158.81
Account No. 2434  Munawar A. Qurashi, MD 2041 Troon Drive Henderson, NV 89074		-	Medical				
							46.92
Account No. xxU670  Nco-MedcIr PO Box 8547 Philadelphia, PA 19101		-	Medical				611.00
Account No. xxx2447			Medical		Г		
Nevada Cancer Centers PO BOX 26237 Las Vegas, NV 89126		-					98.70
Sheet no17_ of _28_ sheets attached to Schedule of	•			Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	5,605.43

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	COD	1	sband, Wife, Joint, or Community	CON	U N L	DI	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C A M		T I N	Z		AMOUNT OF CLAIM
Account No. xxx938U			Medical	Т	DATED		
Nevada Heart & Vascular Center PO BOX 98813 Las Vegas, NV 89193		-					78.19
Account No. xxxx6051	-		Medical	$\vdash$	$\vdash$	L	7
Nevada Internal Medicine Center-Burt MD 4275 Burnham Ave Ste 200A Las Vegas, NV 89119		-					
							19.29
Account No. xxxxxxxxxxxx0001  Nissan Motor Acceptanc Po Box 660360 Dallas, TX 75266		-	Opened 7/27/04 Last Active 2/01/10 Auto: 2004 Nissan Quest (86,091 Miles)				
							Unknown
Account No. xxxxxxxxxxxxxxx9372  Nissan Motor Acceptanc 2901 Kinwest Pkwy Irving, TX 75063		-	Opened 7/11/96 Automobile				Unknown
Account No. xxxxxxxxxxxxx3003			Opened 7/02/99 Last Active 2/01/03				
Nissan-Infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063		-	Automobile				0.00
Sheet no18_ of _28_ sheets attached to Schedule of		_		Subt			97.48
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	37.340

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

	16		ahand Wife Isint or Community	10	1	D	ı
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	I QU I D	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx1423			Opened 2/09/02 Last Active 8/01/05	T	E		
Nissan-Infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063		-			D		0.00
Account No. xxx2486			Opened 6/01/99 Last Active 1/01/03 Mortgage				0.00
Pcfs 309 Vine St Cincinnati, OH 45202		-					
							0.00
Account No. xxxxxxxxx8335  Peoples Choice Home Lo 7515 Irvine Center Dr Irvine, CA 92618		-	Opened 1/19/05 Last Active 6/12/07 Mortgage				0.00
Account No. xxx148-8			Collection			<del> </del>	0.00
Plus Four, INC 6345 S. Pecos, RD Ste 212 Las Vegas, NV 89120		_					204.98
Account No. xxxx7586	$\vdash$		Opened 1/07/05 Last Active 1/03/08	+			204.30
Popular Mortgage Srvci 121 Woodcrest Rd Cherry Hill, NJ 08003		-	Mortgage				0.00
Sheet no19_ of _28_ sheets attached to Schedule of			<u> </u>	Sub	tot	l al	
Creditors Holding Unsecured Nonpriority Claims			(Total o	f this	pa	ge)	204.98

In re	Eugenia Bartolome Cabucana	Case No	
-		Debtor ,	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U N	P	
MAILING ADDRESS	CODEBTOR	н	DATE CLAIM WAS INCURRED AND	C O N T		S	
INCLUDING ZIP CODE,	₽	W	CONSIDERATION FOR CLAIM. IF CLAIM		Q	Įψ	AMOUNTE OF CLARA
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	G	- QD-	Ė	AMOUNT OF CLAIM
(See instructions above.)	R	Ŭ		N G E N	D A T E D	D	
Account No. xxx9547			Medical	Т	E		
	1				D		
Pulmanary Physicians of Nevada							
8275 S. Eastern Ave Ste 200		-					
Las Vegas, NV 89123							
							38.58
Account No. xx4370			Medical		Г		
	1						
Pulmonary Associates							
1701 W. Charleston Blvd Ste 550		-					
Las Vegas, NV 89102							
							228.26
Account No. xxxx0093			Medical	T	М		
	1						
QMI Nevada- Portable X-Ray							
2490 Professional Court		-					
#110							
Las Vegas, NV 89128							
							7.28
Account No. xxxxx0182			Medical	T	Н		
	1						
QMI Nevada- Portable X-Ray							
2490 Professional Court		-					
#110							
Las Vegas, NV 89128							
							4.67
Account No. xxxxxxxxx3639	T	T	Opened 10/30/09 Last Active 6/01/09	T	Т		
	1		Collection Pulmonary Associates				
Quantum Collections	l						
3224 Civic Center Dr	1	-					
North Las Vegas, NV 89030	1						
	1						
							236.00
Sheet no. <b>20</b> of <b>28</b> sheets attached to Schedule of			<u> </u>	Subt	L tota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				514.79

In ro	Eugania Partalama Cabusana	Case No.	
In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor,	

		LU .	lahand Wife laint or Community		Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		N L I Q U	I S P	AMOUNT OF CLAIM
Account No. xxxxxxxx3297			Opened 11/08/05 Last Active 12/28/05	Т	T E		
Quantum Collections 3224 Civic Center Dr North Las Vegas, NV 89030		-	Collection Cox Communications		D		0.00
Account No. xxxxxx1789			Medical	+			
Quest Diagnostics P.O. Box 79052 Phoenix, AZ 85062-9025		-					
							22.90
Account No. xxxxxx-xRAON  Radiology Associates of Nevada  Dept LA 21686  Pasadena, CA 91185		-	Medical				105.24
Account No. xxx1702  Rajeev Prasad, MD PC PO BOX 98813		-	Medical				
Las Vegas, NV 89193							338.40
Account No. x5932  Redrock Medical Center Dept 6210 Los Angeles, CA 90084		-	Medical				425.01
Sheet no. <b>21</b> of <b>28</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub			891.55

In re	Eugenia Bartolome Cabucana		Case No.	
_		Debtor		

CREDITOR'S NAME,	ç	Hu	sband, Wife, Joint, or Community		U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C N H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. x7784			Medical	T	E		
Robert M. Yeh MD PC PO BOX 93838 Las Vegas, NV 89193		-			D		23.19
Account No. xxxxxxxxxxx4092			Store Card				
Sams Club PO BOX 960013 ORLANDO, FL 32896		-					
							4,690.02
Account No. xxx-x8316			Medical	T	H		
Sanjay Vohra, MD PO BOX 91299 Henderson, NV 89009		-					177.16
Account No. xxxxxxxxxxx6559			Saara Charge	+	⊢		177.10
Sears Credit Cards PO BOX 6937 The Lakes, NV 88901		-	Sears Charge				5,668.27
Account No. xxxxxxxx3346			Opened 1/01/84 Last Active 12/01/08		Г		
Sears/Cbsd 133200 Smith Rd Cleveland, OH 44130		_	ChargeAccount				0.00
Sheet no. 22 of 28 sheets attached to Schedule of			,	Sub	tota	1	40.550.04
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	10,558.64

In re	Eugenia Bartolome Cabucana	Case No	
		Debtor	

	_					_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIGUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx406			Opened 1/15/04 Last Active 8/20/06	Т	T E		
Sears/Cbsd Po Box 6189 Sioux Falls, SD 57117		-			D		0.00
Account No. xxxxxx0000			Medical				
Siena Cardiology PO BOX 50437 Henderson, NV 89016		-					
							38.58
Account No.			Medical Bill				
St. Rose Siena Henderson, NV 89052		-					
							0.00
Account No. xx7715  Time Investment Co			Opened 8/31/01 Last Active 9/01/04				
929 N River Rd West Bend, WI 53090		-					
							0.00
Account No. xxxxxxx8232			Medical Bill				
UMC P.O. Box 58563 Las Vegas, NV 89193		_					
							0.404.00
							8,494.89
Sheet no. <b>23</b> of <b>28</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt his			8,533.47

In re	Eugenia Bartolome Cabucana	Case N	Io
_		Debtor	

	_						
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIGUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxx0050			Medical	T	T E		
UMC PO Box 98563 Las Vegas, NV 89193-8563		-			D		64.83
Account No. xxxxxxx0043			Medical				
UMC PO Box 749556 Los Angeles, CA 90074-9556		-					00.70
							38.79
UMC PO Box 98563 Las Vegas, NV 89193-8563		-	Medical				
							642.79
Account No. xxxxxxx0010			Medical				
PO Box 98563 Las Vegas, NV 89193-8563		-					
							585.28
Account No. xxxxxxx0068	<u> </u>		Medical				
UMC PO Box 749556 Los Angeles, CA 90074-9556		-					
							27.60
Sheet no. <b>24</b> of <b>28</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			1,359.29

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

						_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		υz	D	
MAILING ADDRESS	CODEBTOR	н	DATE CLAIM WAS INCUDDED AND	CONT	l I	S P	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	111	Q	Ü	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N I	- QD-	T	AMOUNT OF CLAIM
(See instructions above.)	Ř	C	15 5 5 5 5 5 1 1 1 5 5 1 1 1 1 5 5 1 1 1 1 2 1	NGEN	Ď	Ď	
Account No. xxxxxxx7186			Medical	Τ̈́	DATED		
	1				D		
UMC							
PO Box 98563		-					
Las Vegas, NV 89193-8563							
							1,171.78
							1,171.70
Account No. xxxxxxx0018			Medical				
	1						
UMC							
PO Box 98563		-					
Las Vegas, NV 89193-8563							
							236.45
Account No. xxxxxxx0126			Medical	$\vdash$			
Ticcount (o. AAAAAA 120	ł		inculoui				
имс							
PO Box 98563		l_					
Las Vegas, NV 89193-8563							
Las vegas, NV 09193-0303							
							870.15
Account No. xxxxxxx7186			Medical				
	1						
UMC Medical Center							
PO Box 98193		-					
Las Vegas, NV 89193-8563							
							43.31
Account No. x3911			Medical	$\vdash$			
Trecount to. Acct 1	1		modical				
Universety Health System							
1701 W. Charleston Blvd #215		۱_					
Las Vegas, NV 89102							
Las vegas, IVV 03102							
							l Inden
							Unknown
Sheet no. 25 of 28 sheets attached to Schedule of				Subt	ota	1	0.004.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis 1	pag	e)	2,321.69

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	н	DATE CLABAWAG DIGUDDED AND	CONT	U N L	S P	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1	l Q	Ü	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N	۱U	ΙF	AMOUNT OF CLAIM
(See instructions above.)	Ř	C	is separate agreen, see similar	N G E N	Ď	Ď	
Account No. x0404			Medical	<del> </del>	DATED		
				L	Ď		
Urology Specialists of Nevada							
5701 West Charleston Blvd		-					
Ste 201							
Las Vegas, NV 89146							
							98.34
				丄	丄		30.34
Account No. xxxxxxxxx4908			Opened 6/21/04 Last Active 5/01/09				
			Mortgage				
Wachovia Mortgage, Fsb							
4101 Wiseman Blvd # Mc-T		-					
San Antonio, TX 78251							
							Unknown
Account No. xxxxxxxxx3914			Opened 9/09/04 Last Active 8/09/05	T	${f +}$	t	
			Mortgage				
Wachovia Mortgage, Fsb							
4101 Wiseman Blvd # Mc-T		_					
San Antonio, TX 78251							
San Antonio, 1X 70251							
							0.00
				퇶	╙		0.00
Account No. xxxxxx2001			Opened 3/07/99				
Welle Ferre Donle							
Wells Fargo Bank							
Po Box 5445		-					
Portland, OR 97228							
							Unknown
Account No. xxxxxxxxxxxx6614			Credit Card	Т	П		
Wells Fargo Card Services							
PO BOX 30086		-					
Los Angeles, CA 90030							
							13,049.26
Share 20 of 20 of 4 to 1 1 to 51 1 1 5		_	l	<u></u>	<u></u>	<u></u>	, , ,
Sheet no. <b>26</b> of <b>28</b> sheets attached to Schedule of				Subt			13,147.60
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nıs	pag	ge)	·

In re	Eugenia Bartolome Cabucana	Case No.	
-		Debtor	

Г			shand Wife laint or Community	Tc	Ιυ	Ь	ı
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH_ZGEZH	Q	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxx0105			Opened 3/01/99 Last Active 7/01/09		E		
Wfb Cd Svc P.O. Box 5445 Portland, OR 97208		-	ChargeAccount		D		13,049.00
Account No. xxx-xxxx2751	┝		Opened 12/01/04 Last Active 9/01/08	+	$\vdash$	_	10,01010
Wff 34204 Van Dyke Ave Suite 1-I Sterling Heights, MI 48312-4647		-					0.00
Account No. xxxxxxxxxxx9168  Wffinance 800 Walnut St Des Moines, IA 50309		-	Opened 8/28/01 Last Active 8/01/02 Automobile				0.00
Account No. xxxxxxxxxx2751  Wffinance 800 Walnut St Des Moines, IA 50309		-	Opened 12/16/02 Last Active 12/22/04 Automobile				0.00
Account No. xxxxxxxxxxxxxxx223  Wfnnb/Express 4590 E Broad St Columbus, OH 43213		-	Opened 7/26/01 Last Active 11/07/01 ChargeAccount				0.00
Sheet no. <b>_27</b> _ of <b>_28</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub this			13,049.00

In re	Eugenia Bartolome Cabucana	Case	e No.
-		Debtor,	

	16	L.,	about Wife Islant or Oceanousity	Τ.				
CREDITOR'S NAME,	ŏ	1	sband, Wife, Joint, or Community	<u>ا</u> و	N	i li	١	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	W J	CONSIDERATION FOR CLAIM. IF CLAIM	000	ΙQ		U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	N G E N T	: 11	- 1 1	FI	
Account No. xxxxxxxx1651			Opened 12/01/97 Last Active 6/01/00 CombinedCreditPlan	T	D A T E D			
Zale/Cbsd						T		
Po Box 6497		-				ı		
Sioux Falls, SD 57117								
								0.00
Account No. xxxxxxxxxxxx2780			Store Card			Ī		
ZALES - GORDONS								
Des Moines, IA 50364		-						
								4 750 00
								1,752.20
Account No.								
Account No.					T	T	┪	
Account No.	t	H		$\dagger$	$^{\dagger}$	t	$\dashv$	
	1							
Sheet no. <b>28</b> of <b>28</b> sheets attached to Schedule of		<u> </u>		Sub	to*	 1	$\dashv$	
Creditors Holding Unsecured Nonpriority Claims			(Total of				۱,	1,752.20
Creations rising this current rouphorty Chains			(Total of		-	-	ŀ	
			(Report on Summary of S		Tot dul			109,809.27
			(report on building of b	CIIC	uul		/ L	<u> </u>

#### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 51 of 78

B6G (Official Form 6G) (12/07)

I	Fugania Bartalama Cahusana		Core No	
In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor	•	

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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).

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

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Dominador Bartolome 1518 Starlight Canyon Ave Las Vegas, NV 89183 Residential Lease Agreement \$300 Monthly

Golden Sunshine Alzheimer's Home Care 309 La Rue Court Las Vegas, NV 89145 Residential Lease Agreement For \$2,500 Monthly

Kathleen & Christoper Cabucana 1518 Starlight Canyon Ave Las Vegas, NV 89183 Residential Lease Agreement \$700 Monthly

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 52 of 78

B6H (Official Form 6H) (12/07)

In re	Eugenia Bartolome Cabucana	Case No.
-	<del>-</del>	Debtor

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or 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).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 53 of 78

**B6I (Official Form 6I) (12/07)** 

In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor(s)		

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:		F DEBTOR AND SP	OUSE		
Widowed	RELATIONSHIP(S): None.	AGE(S):			
Employment:	DEBTOR		SPOUSE		
Occupation	None				
Name of Employer	Unemployment Nevada				
How long employed					
Address of Employer					
	Las Vegas, NV 89101				
INCOME: (Estimate of average of	or projected monthly income at time case filed)		DEBTOR		SPOUSE
	nd commissions (Prorate if not paid monthly)	\$	0.00	\$	N/A
2. Estimate monthly overtime		\$	0.00	\$	N/A
3. SUBTOTAL		\$	0.00	\$	N/A
4. LESS PAYROLL DEDUCTION	NS				
<ul> <li>a. Payroll taxes and social se</li> </ul>	ecurity	\$	0.00	\$	N/A
b. Insurance		\$	0.00	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify):		\$	0.00	\$	N/A
			0.00	\$	N/A
5. SUBTOTAL OF PAYROLL D	EDUCTIONS	\$	0.00	\$	N/A
6. TOTAL NET MONTHLY TAK	KE HOME PAY	\$	0.00	\$	N/A
7. Regular income from operation	of business or profession or farm (Attach detailed stater	ment) \$	0.00	\$	N/A
8. Income from real property		\$	3,500.00	\$	N/A
9. Interest and dividends		\$	0.00	\$	N/A
dependents listed above	port payments payable to the debtor for the debtor's use of	or that of \$	0.00	\$	N/A
11. Social security or government	assistance	_		_	
(Specify):			0.00	\$ <u></u>	N/A
12 D : : :		\$_	0.00	\$ <u></u>	N/A
<ul><li>12. Pension or retirement income</li><li>13. Other monthly income</li></ul>		\$	0.00	\$	N/A
(Specify):		\$	0.00	\$	N/A
			0.00	\$	N/A
14. SUBTOTAL OF LINES 7 TH	ROUGH 13	\$	3,500.00	\$	N/A
15. AVERAGE MONTHLY INCO	OME (Add amounts shown on lines 6 and 14)	\$	3,500.00	\$	N/A
16. COMBINED AVERAGE MO	NTHLY INCOME: (Combine column totals from line 1	5)	\$	3,500.	.00

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

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

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 54 of 78

B6J (Official Form 6J) (12/07)

In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor(s)		

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

•		
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? Yes No _X		
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	0.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	200.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	25.00
8. Transportation (not including car payments)	\$	0.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	80.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other See Detailed Expense Attachment	\$	4,272.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$	0.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$	4,577.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	_	
a. Average monthly income from Line 15 of Schedule I	\$	3,500.00
b. Average monthly expenses from Line 18 above	\$	4,577.00
c. Monthly net income (a. minus b.)	\$	-1,077.00

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 55 of 78

B6J (Off	icial Form 6J) (12/07)			
In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor(s)		

# $\frac{\textbf{SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)}}{\textbf{Detailed Expense Attachment}}$

### **Other Installment Payments:**

BAC Home Loans-1st- Starlight	\$ 2,022.00
Wachovia-La Rue	\$ 1,500.00
BAC Home Loans-2nd-Starlight	\$ 750.00
<b>Total Other Installment Payments</b>	\$ 4,272.00

### Case 10-16216-lbr Doc 1 Entered 04/09/10 15:42:18 Page 56 of 78

B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court District of Nevada**

In re	Eugenia Bartolome Cabucana			Case No.			
			Debtor(s)	Chapter	11		
	DECLARATION CONCERNING DEBTOR'S SCHEDULES						
	DECLARATION UNDER PENA	LTY (	F PERJURY BY INDIVI	DUAL DEB	TOR		
	I declare under penalty of perjury that I have about a and that they are true and appropriate the have				es, consisting of43		
	sheets, and that they are true and correct to the best	t Of Hij	knowledge, information,	ma bener.			
Date	<b>April 9, 2010</b> Signa	ature	/s/ Eugenia Bartolome 0	abucana			
			Eugenia Bartolome Cab	ucana			
			Debtor				

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

B7 (Official Form 7) (04/10)

### United States Bankruptcy Court District of Nevada

In re	Eugenia Bartolome Cabucana		Case No.	
		Debtor(s)	Chapter	11

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, 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; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$44,082.00 2008: Debtor Employment Income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

None

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

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

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/ **TRANSFERS**

**AMOUNT** PAID OR VALUE OF **TRANSFERS** 

AMOUNT STILL **OWING** 

NAME AND ADDRESS OF CREDITOR

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

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

4. Suits and administrative proceedings, executions, garnishments and attachments

None

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

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

STATUS OR

AND LOCATION

DISPOSITION

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

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 5. Repossessions, foreclosures and returns

None

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

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### 6. Assignments and receiverships

None

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

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

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

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF **ORDER** 

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION **RELATIONSHIP TO** DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Cricket Debt Counseling, Inc. 10121 SE Sunnyside Rd., Suite 300

Clackamas, OR 97015 Piet & Wright

3130 S. Rainbow Blvd., Suite 304 Las Vegas, NV 89146

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

1/12/10

OR DESCRIPTION AND VALUE OF PROPERTY \$35.00

AMOUNT OF MONEY

\$9,967.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

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

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

4

### 12. Safe deposit boxes

None

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

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

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

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None I

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

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

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

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

**NAME** 

### Noli Cabucana (Deceased)

#### 17. Environmental Information.

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

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

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

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

None

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

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

20000

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

OTICE LAW

SITE NAME AND ADDRESS

docket number.

GOVERNMENTAL UNIT

NOTICE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

None

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

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

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

6

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

Golden Sunshine Alzheimers Home Care Inc 309 La Rue Court Las Vegas, NV 89145 **Alzheimers Home Care** 

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

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

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

#### 20. Inventories

None

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

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

### 21 . Current Partners, Officers, Directors and Shareholders

None

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

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

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

NAME ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

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

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

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

#### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

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

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

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

Date April 9, 2010 Signature

re /s/ Eugenia Bartolome Cabucana

Eugenia Bartolome Cabucana

Debtor

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

# **United States Bankruptcy Court District of Nevada**

In re	Eugenia Bartolome Cabucana	21501100 01 110 1000	Case No.			
111 10	Eugeria Bartolomo Gazagana	Debtor(s)	Chapter	11		
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR DI	EBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services re		
	For legal services, I have agreed to accept			+/-		
	Prior to the filing of this statement I have received			+/- 9,967.00		
	Balance Due		\$	TBD		
2. ′	The source of the compensation paid to me was:					
	Debtor Other (specify):					
3. ′	The source of compensation to be paid to me is:					
	Debtor Other (specify):					
4.	I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are men	abers and associates of	my law firm.	
	I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
1	<ul> <li>Analysis of the debtor's financial situation, and rendering to the Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors.</li> <li>[Other provisions as needed]         <ul> <li>Negotiations with secured creditors to regreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour</li> </ul> </li> </ul>	ment of affairs and plan which is and confirmation hearing, and educe to market value; exc is as needed; preparation	n may be required; nd any adjourned her emption planning	arings thereof;	ling of	
<b>5.</b> I	By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors adversary proceeding.					
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any analysis and complete statement of any statement	agreement or arrangement for	payment to me for r	epresentation of the del	btor(s) in	
Dated	l: April 9, 2010	/s/ Charles T. Wri	ight NV			
		Charles T. Wright	t NV No.10285			
		Piet & Wright 3130 S. Rainbow	Blvd., Suite 304			
		Las Vegas, NV 89		•		
			Fax: (702) 566-483 com, tiffany@pie			
		stephanie@pietw		·····g·····,		

# **United States Bankruptcy Court**District of Nevada

In re	Eugenia Bartolome Cabucar	าล	Case No.			
		Debtor(s)	Chapter	11		
	VERIFICATION OF CREDITOR MATRIX					
Γhe ab	ove-named Debtor hereby verific	es that the attached list of creditors is true and co	rrect to the best	of his/her knowledge.		
Date:	April 9, 2010	/s/ Eugenia Bartolome Cabucar	าล			
		Eugenia Bartolome Cabucana Signature of Debtor				
		Signature of Debior				

Eugenia Bartolome Cabucana 3709 Liliy Haven Ave Las Vegas, NV 89120

Charles T. Wright NV Piet & Wright 3130 S. Rainbow Blvd., Suite 304 Las Vegas, NV 89146

Dept. of Employment, Training & Rehab Employment Security Division 500 East Third Street Carson City, NV 89713

State of Nevada Dept. of Motor Vehicles Attn: Legal Division 555 Wright Way Carson City, NV 89711

Internal Revenue Services P.O. Box 1058416 Atlanta, GA 30348-5416

Nevada Dept of Taxation, Bankruptcy Sec. 555 E. Washington Ave. 1300 Las Vegas, NV 89101

United States Trustee 300 Las Vegas Bulvd South #4300 Las Vegas, NV 89101

Massachusetts Department of Revenue Bankruptcy Unit PO Box 9564 100 Cambridge Street 7th Floor Boston, MA 02114-9564

Acct Corp Acct No xxxx51N1 Acctcorp Of Southern Nevada 4955 S Dura Las Vegas, NV 89113

Advanced

advanced Heart Associates Acct No x0475 2470 E. Flamingo Road Suites A & B Las Vegas, NV 89121

AMCA Acct No xxxxx5089 PO Box 1235 Elmsford, NY 10523-0935 American Medical Response-Nevada Acct No xxxxx3050 PO Box 3429 Modesto, CA 95353

Armada Cor Acct No xxx2600 93 Eastmont Ave Suite #100 East Wenatchee, WA 98802

Associated Pathologists Chartered Acct No xxxxx1789 P.O. Box 79074 Phoenix, AZ 85062

Bac Home Loans Servici Acct No xxxxx9154 450 American St Simi Valley, CA 93065

Bank of America Home Loans Acct No xxxxx9154 PO BOX 515503 Los Angeles, CA 90051

Bank of America Home Loans Acct No xxxxx2053 1518 Starlight Canyon Ave. Las Vegas, NV 89183

Bashir A. Chowdhry, MD Acct No xx0779 4180 South Pecos Dr. Ste 175 Las Vegas, NV 89121

Bay Area Credit Service LLC Acct No 83681114 1901 W. 10th St. Antioch, CA 94509

Bioscrip Pharmacy Acct No xxxx5262 14847 Collections Cnt Dr Chicago, IL 60693

Brian E. Lee, MD, LTD Acct No xxxx4946 PO BOX 621406 Las Vegas, NV 89162

Cardiovasc & Thoracic Surgeons Acct No xx0779 4180 S. Pecos Suite 175 Las Vegas, NV 89121-5076 Cardiovascular & Thoracic Surgery Acct No xx0779 4180 S. Pecos Road Las Vegas, NV 89121

Center for Lunf Diseases Acct No xxx2944 PO BOX 98898 Dr #1003 Las Vegas, NV 89193

Chase
Acct No xxxxxxxxxx5009
201 N Walnut St # De1-10
Wilmington, DE 19801

Chase Acct No xxxx0746 10790 Rancho Bernardo Rd San Diego, CA 92127

Chase Acct No xxxxxxxxx0807 Po Box 1093 Northridge, CA 91328

Chase/Cc Acct No xxxxxxxxxxx4306 Po Box 15298 Wilmington, DE 19850

Chevron Acct No xx1168 Pob 5010 Room 1242 Concord, CA 94524

Citifinancial Acct No xxxxxxxxxxxx0380 3220 E Flamingo Rd Ste C Las Vegas, NV 89121

Citifinancial Acct No xxxxxxxxxxxx8720 3035 N Rainbow Blvd Las Vegas, NV 89108

Citifinancial Retail S Acct No xxxxxxxxxxx8360 Po Box 499 Hanover, MD 21076

CITIFINANCIAL RETAIL SERVICES Acct No xxxxxxxxxxx0281 PO BOX 22060 TEMPE, AZ 85285 CMRE Financial Services, Inc. Acct No 0011126835 3075 East Imperial Highway STE 200 Brea, CA 92821

Comprehensive Cancer Centers Acct No x4254 PO Box 911265 Dallas, TX 75391-1265

Consultants For Pathology Acct No xxxxx-xxx7680 4607 Lakeview Canyon Dr Suite 418 Westlake Village, CA 91361

Consumer debt Services, LLC Acct No xxxx1460 PO BOX 714017 Columbus, OH 43271-4017

Critical Care Consultants Acct No xxx4861 PO BOX 98898 Las Vegas, NV 89193

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Desert Radiologists Acct No xx xxx5465 3090 S. Durango Ste 200 Las Vegas, NV 89117

Desert Radiologists Acct No xxxxxx-xDSRT POB 3057 Indianapolis, IN 46206

Desert Radiology Acct No xxxxxx-xxxxx x2809 3920 S Eastern Ave Las Vegas, NV 89119

Desert Springs Hospital Las Vegas, NV 89119

Diabetic Care Network Acct No x7719 3260 NW 23 Ave #800 Pompano Beach, FL 33069 Dillard's American Express Card Acct No xxxxxxxxxx4594 PO BOX 960012 ORLANDO, FL 32896

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Escallate LLC
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Frdf/Cbsd Acct No xxxxxxxxxxxx6124 Po Box 6497 Sioux Falls, SD 57117

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Gemb/Care Credit Acct No xxxxxxxx1085 Po Box 981439 El Paso, TX 79998

Gemb/Chevron Acct No xxxxxxxx1030 4125 Windward Plz Alpharetta, GA 30005

Gemb/Dildc Acct No xxxxxxx9726 Po Box 981402 El Paso, TX 79998-1402

Gemb/Dilla Acct No xxxxxxxxxxx3486 Po Box 52005 Phoenix, AZ 85072

Gemb/Dillards Acct No xxxxxxxxxxx9713 Po Box 981400 El Paso, TX 79998

Gemb/Dillards Dc Acct No xxxxxxxx7264 Po Box 981402 El Paso, TX 79998

Gemb/Jcp Acct No -xx6178 Po Box 984100 El Paso, TX 79998

Gemb/Kinetico Acct No xxxxxxxx5134 Po Box 981439 El Paso, TX 79998 Gemb/Sams
Acct No xxxxxxxx1270

Gemb/Sams Club Acct No xxxxxxxx1270 Po Box 981400 El Paso, TX 79998

Gemb/Sams Club Dc Acct No xxxxxxxxxxx4092 Po Box 981400 El Paso, TX 79998

Gemb/Sony Acct No xxxxxxxx1873 Po Box 981439 El Paso, TX 79998

Gemb/Whitehall Acct No xxxxxxxx1004 Po Box 981439 El Paso, TX 79998

Gmac Mortgage Acct No xxxxx5671 Po Box 4622 Waterloo, IA 50704

Gmac Mortgage Llc Acct No xxxxx3790 3451 Hammond Ave Waterloo, IA 50702

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Hawaii State Fcu Visa Acct No xxxxxxxxxxx1761 560 Halekauwila St Honolulu, HI 96813

Heart Center of Nevada Acct No xx6713 700 Shadow Lane #240 Las Vegas, NV 89106-4158 Infectious Diseases of S. Nevada Acct No xxxx0000 1228 Olivia Dr. Henderson, NV 89011

Internal Revenue Service Acct No xxx-xx-8407 ACS Support PO BOX 24017 Fresno, CA 93888-0500

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Nevada Heart & Vascular Center Acct No xxx938U PO BOX 98813 Las Vegas, NV 89193

Nevada Internal Medicine Center-Burt MD Acct No xxxx6051 4275 Burnham Ave Ste 200A Las Vegas, NV 89119

Nissan Motor Acceptanc Acct No xxxxxxxxxxx0001 Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptanc Acct No xxxxxxxxxxxx9372 2901 Kinwest Pkwy Irving, TX 75063

Nissan-Infiniti Lt Acct No xxxxxxxxxxxx3003 2901 Kinwest Pkwy Irving, TX 75063

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Peoples Choice Home Lo Acct No xxxxxxxxx8335 7515 Irvine Center Dr Irvine, CA 92618 Plus Four, INC Acct No xxx148-8 6345 S. Pecos, RD Ste 212 Las Vegas, NV 89120

Popular Mortgage Srvci Acct No xxxx7586 121 Woodcrest Rd Cherry Hill, NJ 08003

Preferred Dialysis Care East Acct No 101342 PO Box 52432 Phoenix, AZ 85072-2432

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Pulmonary Associates Acct No xx4370 1701 W. Charleston Blvd Ste 550 Las Vegas, NV 89102

QMI Nevada- Portable X-Ray Acct No xxxx0093 2490 Professional Court #110 Las Vegas, NV 89128

Quantum Collections Acct No xxxxxxxxx3639 3224 Civic Center Dr North Las Vegas, NV 89030

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Wells Fargo Card Services Acct No xxxxxxxxxxx6614 PO BOX 30086 Los Angeles, CA 90030

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