

Official Form 1 (04/10)

United States Bankruptcy Court DISTRICT OF NEVADA		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): BELL, KATHLEEN ELIZABETH		Name of Joint Debtor (Spouse)(Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): NONE		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) Complete EIN (if more than one, state all): 8943		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 8309 CHERRY GLAZE AVENUE UNIT 201 LAS VEGAS NEVADA		Street Address of Joint Debtor (No. and Street, City, and State):
ZIPCODE 89145		ZIPCODE
County of Residence or of the Principal Place of Business: CLARK		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): SAME		Mailing Address of Joint Debtor (if different from street address):
ZIPCODE		ZIPCODE
Location of Principal Assets of Business Debtor (if different from street address above): SAME		ZIPCODE
Type of Debtor (Form of organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below <hr/>	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other MULTI REAL ESTATE <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose" <input checked="" type="checkbox"/> Debts are primarily business debts. <hr/> Chapter 11 Debtors: Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <hr/> Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): BELL, KATHLEEN	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: NONE	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: NONE		Case Number:	Date Filed:
District:		Relationship:	Judge:
<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition</p>		<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>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 have delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p>X _____ 07/07/2010 Signature of Attorney for Debtor(s) Date</p>	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box)			
<input type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
		_____ (Name of landlord that obtained judgment)	
		_____ (Address of landlord)	
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): BELL, KATHLEEN
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[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)</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ BELL, KATHLEEN Signature of Debtor</p> <p>X Signature of Joint Debtor</p> <p>Telephone Number (if not represented by attorney)</p> <p>07/07/2010 Date</p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed name of Foreign Representative)</p> <p>07/07/2010 _____ (Date)</p>
<p style="text-align: center;">Signature of Attorney*</p> <p>X /s/ Thomas E. Crowe Signature of Attorney for Debtor(s)</p> <p>Thomas E. Crowe 3048 Printed Name of Attorney for Debtor(s)</p> <p>Thomas E. Crowe Professional Law Corp. Firm Name</p> <p>7381 W. Charleston Blvd. Address</p> <p>Suite 110 _____ Las Vegas NV 89117 _____ 702-794-0373 Telephone Number</p> <p>07/07/2010 Date</p> <p><small>*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.</small></p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>_____ _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>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.</i></p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>07/07/2010 _____ Date</p>	<p>X _____ Date</p>

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

In re *BELL, KATHLEEN*

Case No.
Chapter 11

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

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)
1 <i>BANK OF AMERICA HOME LOANS P.O. BOX 10227 VAN NUYS CALIFORNIA 91410-0227</i>	Phone: <i>BANK OF AMERICA HOME LOANS P.O. BOX 10227 VAN NUYS CALIFORNIA 91410-0227</i>	<i>Mortgage</i>	Value: Net Unsecured:	\$ 327,900.00 \$ 195,000.00 \$ 132,900.00
2 <i>M & I BANK P.O. BOX 3201 MILWAUKE WISCONSIN 53201-3201</i>	Phone: <i>M & I BANK P.O. BOX 3201 MILWAUKE WISCONSIN 53201-3201</i>	<i>2ND MORTGAGE</i>		\$ 86,800.00
3 <i>CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014</i>	Phone: <i>CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014</i>	<i>Credit Card Purchases</i>		\$ 4,500.00
4 <i>INTERNAL REVENUE SERVICE OGDEN UTAH 84201-0030</i>	Phone: <i>INTERNAL REVENUE SERVICE OGDEN UTAH 84201-0030</i>	<i>TAXES</i>		\$ 1,900.00
5 <i>WELLS FARGO P.O. BOX 10347 DES MOINES IOWA 50306</i>	Phone: <i>WELLS FARGO P.O. BOX 10347 DES MOINES IOWA 50306</i>	<i>Credit Card Purchases</i>		\$ 1,900.00

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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)
6 CITI DALLAS TEXAS 75265	Phone: CARD SERVICES CENTER DES MOINES IOWA 50364-0001	Credit Card Purchases		\$ 1,800.00
7 WELLS FARGO	Phone: PRIMARY FINANCIAL SERVICES 3115 NORTH 3RD AVENUE SUITE 112 PHOENIX ARIZONA 85013	Credit Card Purchases		\$ 1,200.00
8 CARMEL CANYON HOA P.O. BOX 23159 SAN DIEGO CALIFORNIA 92193-3159	Phone: ALLIED TRUSTEE SERVICES 3721 DOUGLAS BLVD. SUITE 345 ROSEVILLE CALIFORNIA 95661	HOA	*Value: Net Unsecured: *Prior Liens Exist	\$ 640.00 \$ 195,000.00 \$ 640.00
9 DEPARTMENT OF FINANCIAL SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101	Phone: DEPARTMENT OF FINANCIAL SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101	Utility Bills		\$ 620.00
10 DEPARTMENT OF FINANCE SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101	Phone: DEPARTMENT OF FINANCE SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101	Utility Bills		\$ 570.00
11 SUNRISE MOUNTIANVIEW HOSPITAL 3100 NORTH TEYANA WAY LAS VEGAS NEVADA 89128-0436	Phone: WEST ASSET MANAGEMENT, INC. P.O. BOX 790113 ST. LOUIS MISSOURI 63179-0113	Medical Bills		\$ 550.00
12 CITI FINANCIAL RETAIL SERVICES P.O. BOX 22060 TEMPE ARIZONA 85285-2060	Phone: CITI FINANCIAL RETAIL SERVICES P.O. BOX 22060 TEMPE ARIZONA 85285-2060	Credit Card Purchases		\$ 510.00

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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)
13 COX COMMUNICATIONS P.O. BOX 3901 LAS VEGAS NEVADA 89127-3901	Phone: COX COMMUNICATIONS P.O. BOX 3901 LAS VEGAS NEVADA 89127-3901	Utility Bills		\$ 430.00
14 WOMENS CANCER CENTER 9030 WEST SAHARA P.O. BOX 295 LAS VEGAS NEVADA 89117-5744	Phone: WOMENS CANCER CENTER 9030 WEST SAHARA P.O. BOX 295 LAS VEGAS NEVADA 89117-5744	Medical Bills		\$ 300.00
15 REPUBLIC SERVICES P.O. BOX 98508 LAS VEGAS NEVADA 89193-8508	Phone: REPUBLIC SERVICES P.O. BOX 98508 LAS VEGAS NEVADA 89193-8508	UTILITY BILL	*Value: Net Unsecured: *Prior Liens Exist	\$ 220.00 \$ 195,000.00 \$ 220.00
16 CARDIOVASCULAR CONSULTANTS 2300 CORPORATE CIRCLE DRIVE SUITE 100 HENDERSON NEVADA 89074	Phone: CARDIOVASCULAR CONSULTANTS 2300 CORPORATE CIRCLE DRIVE SUITE 100 HENDERSON NEVADA 89074	Medical Bills		\$ 110.00
17 CHASE P.O. BOX 78148 PHOENIX ARIZONA 85062-8148	Phone: CHASE P.O. BOX 78148 PHOENIX ARIZONA 85062-8148	Mortgage	Value: Net Unsecured:	\$ 60,600.00 \$ 90,000.00 \$ 0.00
18 WELLS FARGO BANK, N.A. P.O. BOX 31557 MAC B6955-01B BILLINGS MONTANA 59107-9900	Phone: WELLS FARGO BANK, N.A. P.O. BOX 31557 MAC B6955-01B BILLINGS MONTANA 59107-9900	2ND MORTGAGE		\$ 0.00
19 CITI MORTGAGE P.O. BOX 6006 THE LAKES NEVADA 898901-600	Phone: CITI MORTGAGE P.O. BOX 6006 THE LAKES NEVADA 898901-600	Mortgage	Value: Net Unsecured:	\$ 92,300.00 \$ 100,000.00 \$ 0.00

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I, _____, _____ of the Individual Debtor named as debtor in this case, declare under penalty of perjury that I have read the foregoing List of Creditors Holding Twenty Largest Unsecured Claims and that they are true and correct to the best of my knowledge, information and belief.

Date: 7/7/2010

Signature /s/ BELL, KATHLEEN
Name: BELL, KATHLEEN

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

In re **BELL, KATHLEEN**

Case No.
Chapter **11**

_____ / Debtor

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	\$ 385,000.00		
B-Personal Property	Yes	3	\$ 83,500.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	2		\$ 481,660.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 1,900.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 99,290.00	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 5,450.00
J-Current Expenditures of Individual Debtor(s)	Yes	2			\$ 5,308.00
TOTAL		17	\$ 468,500.00	\$ 582,850.00	

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA

In re **BELL, KATHLEEN**

Case No.
Chapter **11**

_____/ Debtor

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

State the following:

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

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$
4. Total from Schedule F		\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$

In re BELL, KATHLEEN
Debtor

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 7/7/2010

Signature /s/ BELL, KATHLEEN
BELL, KATHLEEN

[If joint case, both spouses must sign.]

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.

In re BELL, KATHLEEN,
Debtor(s)

Case No. _____
(if known)

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 the 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--H Wife--W Joint--J Community--C	Current Value	Amount of Secured Claim
			of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	
509 CASA DEL NORTE DRIVE NORTH LAS VEGAS, NEVADA 89031-2819 NV REAL PROPERTY	Fee Simple		\$ 100,000.00	\$ 92,300.00
6560 BEACON ROAD LAS VEGAS, NEVADA 89108-5388	Fee Simple		\$ 90,000.00	\$ 60,600.00
8900 MONTE ORO DRIVE LAS VEGAS, NEVADA 89131	Fee Simple		\$ 195,000.00	\$ 195,000.00
TOTAL \$			385,000.00	

No continuation sheets attached

(Report also on Summary of Schedules.)

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

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 the 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	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	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 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.		<i>BANK OF AMERICA P.O. BOX 25118 TAMPA, FLORIDA 33622-5118 CHECKING ACCOUNT: 501004174509 Location: In debtor's possession</i>		\$ 300.00
		<i>COMMUNITY ONE FEDERAL CREDIT UNION 2699 NORTH TENAYA WAY LAS VEGAS, NEVADA 89128 SAVINGS SCCOUNT: 0000094181 Location: In debtor's possession</i>		\$ 100.00
		<i>NEVADA POWER 6560 BEACON ROAD LAS VEGAS, NEVADA 89108 Location: In debtor's possession</i>		\$ 300.00
		<i>NEVADA POWER 8900 MONTE ORO DRIVE LAS VEGAS, NEVADA 89131 Location: In debtor's possession</i>		\$ 300.00
4. Household goods and furnishings, including audio, video, and computer equipment.		<i>HOUSEHOLD GOODS Location: In debtor's possession</i>		\$ 2,200.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or	X			

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
collectibles.			
6. Wearing apparel.		WEARING APPAREL <i>Location: In debtor's possession</i>	\$ 400.00
7. Furs and jewelry.	X		
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		
11. Interest 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.		401K WYNN RESORTS	\$ 76,400.00
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 non-negotiable 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 of Real Property.	X		
20. Contingent and non-contingent 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		
22. Patents, copyrights, and other intellectual property. Give particulars.	X		

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Husband--H Wife--W Joint--J Community--C		Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
23. Licenses, franchises, and other general intangibles. Give particulars.	X				
24. Customer lists or other compilations containing personally identifiable information (as described 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.		<i>1999 MERCEDES BENZ C230 Location: In debtor's possession</i>			\$ 3,500.00
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				

In re BELL, KATHLEEN
Debtor(s)

Case No. _____
(if known)

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 \$146,450.*

(Check one box)

11 U.S.C. § 522(b) (2)

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 Exemptions
NEVADA POWER	NRS 21.090(1)(z)	\$ 300.00	\$ 300.00
NEVADA POWER	NRS 21.090(1)(z)	\$ 300.00	\$ 300.00
HOUSEHOLD GOODS	NRS 21.090(1)(b)	\$ 2,200.00	\$ 2,200.00
WEARING APPAREL	NRS 21.090(1)(z)	\$ 400.00	\$ 400.00
401K	NRS 21.090(1)(r)(1)	\$ 76,400.00	\$ 76,400.00
1999 MERCEDES BENZ C230	NRS 21.090(1)(f)	\$ 3,500.00	\$ 3,500.00

* Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In re BELL, KATHLEEN
Debtor(s)

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

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

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

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

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

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

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 <i>(See Instructions Above.)</i>	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Co-Debtor H--Husband W--Wife J--Joint C--Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 7365 Creditor # : 1 BANK OF AMERICA HOME LOANS P.O. BOX 10227 VAN NUYS CALIFORNIA 91410-0227	01/2005 Mortgage 8900 MONTE ORO DRIVE Value: \$ 195,000.00					\$ 327,900.00	\$ 132,900.00
Account No: 0395 Creditor # : 2 CARMEL CANYON HOA P.O. BOX 23159 SAN DIEGO CALIFORNIA 92193-3159	HOA 8900 MONTE ORO DRIVE Value: \$ 195,000.00					\$ 640.00	\$ 640.00
Account No: 0395 Representing: CARMEL CANYON HOA	ALLIED TRUSTEE SERVICES 3721 DOUGLAS BLVD. SUITE 345 ROSEVILLE CALIFORNIA 95661 Value:						
Subtotal \$ (Total of this page)						\$ 328,540.00	\$ 133,540.00
Total \$ (Use only on last page)							

1 continuation sheets attached

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

B6D (Official Form 6D) (12/07) - Cont.

In re BELL, KATHLEEN
Debtor(s)

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address Including ZIP Code and Account Number <i>(See Instructions Above.)</i>	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Co-Debtor H--Husband W--Wife J--Joint C--Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 0989 Creditor # : 3 CHASE P.O. BOX 78148 PHOENIX ARIZONA 85062-8148	Mortgage 6560 BEACON ROAD Value: \$ 90,000.00					\$ 60,600.00	\$ 0.00
Account No: 99-3 Creditor # : 4 CITI MORTGAGE P.O. BOX 6006 THE LAKES NEVADA 898901-600	11/1995 Mortgage 509 CASA DEL NORTE DRIVE Value: \$ 100,000.00					\$ 92,300.00	\$ 0.00
Account No: 68-7 Creditor # : 5 REPUBLIC SERVICES P.O. BOX 98508 LAS VEGAS NEVADA 89193-8508	06/2009 UTILITY BILL 8900 MONTE ORO DRIVE Value: \$ 195,000.00					\$ 220.00	\$ 220.00
Account No:							
Account No:							
Account No:							

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors
Holding Secured Claims

Subtotal \$ (Total of this page)	\$ 153,120.00	\$ 220.00
Total \$ (Use only on last page)	\$ 481,660.00	\$ 133,760.00

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

In re BELL, KATHLEEN

Debtor(s)

Case No. _____

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

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

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

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

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

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re BELL, KATHLEEN ,

Case No. _____

Debtor(s)

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: *Taxes and Certain Other Debts Owed to Governmental Units*

Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred and Consideration for Claim	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
Account No: <i>8943</i> <i>Creditor # : 1</i> <i>INTERNAL REVENUE SERVICE</i> <i>OGDEN UTAH 84201-0030</i>		<i>TAXES</i>				\$ 1,900.00	\$ 1,900.00	\$ 0.00
Account No:								
Account No:								
Account No:								
Account No:								
Account No:								
Account No:								
Subtotal \$ (Total of this page)						1,900.00	1,900.00	0.00
Total \$ (Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)						1,900.00		
Total \$ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and							1,900.00	0.00

Sheet No. 1 of 1 continuation sheets
attached to Schedule of Creditors Holding Priority Claims

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

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on

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

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 9323 Creditor # : 1 CARDIOVASCULAR CONSULTANTS 2300 CORPORATE CIRCLE DRIVE SUITE 100 HENDERSON NEVADA 89074		Medical Bills				\$ 110.00
Account No: 6003 Creditor # : 2 CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014		1/2005 Credit Card Purchases				\$ 4,500.00
Account No: 2875 Creditor # : 3 CITI DALLAS TEXAS 75265		01/2008 Credit Card Purchases				\$ 1,800.00
Account No: 2875 Representing: CITI		CARD SERVICES CENTER DES MOINES IOWA 50364-0001				
Subtotal \$						\$ 6,410.00
Total \$						

2 continuation sheets attached

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

B6F (Official Form 6F) (12/07) - Cont.

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 2264 Creditor # : 4 CITI FINANCIAL RETAIL SERVICES P.O. BOX 22060 TEMPE ARIZONA 85285-2060		Credit Card Purchases				\$ 510.00
Account No: 9-01 Creditor # : 5 COX COMMUNICATIONS P.O. BOX 3901 LAS VEGAS NEVADA 89127-3901		07/2009 Utility Bills				\$ 430.00
Account No: 5271 Creditor # : 6 DEPARTMENT OF FINANCE SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101		Utility Bills				\$ 570.00
Account No: 5349 Creditor # : 7 DEPARTMENT OF FINANCIAL SERV. 400 STEWART AVENUE, CITY HALL 6TH FLOOR LAS VEGAS NEVADA 89101		Utility Bills				\$ 620.00
Account No: 0001 Creditor # : 8 M & I BANK P.O. BOX 3201 MILWAUKE WISCONSIN 53201-3201		04/2003 2ND MORTGAGE				\$ 86,800.00
Account No: 2721 Creditor # : 9 SUNRISE MOUNTIANVIEW HOSPITAL 3100 NORTH TEYANA WAY LAS VEGAS NEVADA 89128-0436		09/2009 Medical Bills				\$ 550.00

Sheet No. 1 of 2 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ \$ 89,480.00

Total \$

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

B6F (Official Form 6F) (12/07) - Cont.

In re BELL, KATHLEEN, Debtor(s)

Case No. _____ (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 2721 Representing: SUNRISE MOUNTIANVIEW HOSPITAL		WEST ASSET MANAGEMENT, INC. P.O. BOX 790113 ST. LOUIS MISSOURI 63179-0113				
Account No: 5355 Creditor # : 10 WELLS FARGO		01/2005 Credit Card Purchases				\$ 1,200.00
Account No: 5355 Representing: WELLS FARGO		PRIMARY FINANCIAL SERVICES 3115 NORTH 3RD AVENUE SUITE 112 PHOENIX ARIZONA 85013				
Account No: 5355 Creditor # : 11 WELLS FARGO P.O. BOX 10347 DES MOINES IOWA 50306		4/2009 Credit Card Purchases				\$ 1,900.00
Account No: 1998 Creditor # : 12 WELLS FARGO BANK, N.A. P.O. BOX 31557 MAC B6955-01B BILLINGS MONTANA 59107-9900		1/2005 2ND MORTGAGE				\$ 0.00
Account No: 6316 Creditor # : 13 WOMENS CANCER CENTER 9030 WEST SAHARA P.O. BOX 295 LAS VEGAS NEVADA 89117-5744		07/2008 Medical Bills				\$ 300.00

Sheet No. 2 of 2 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 3,400.00**

Total \$ **\$ 99,290.00**

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

In re BELL, KATHLEEN

/ Debtor

Case No. _____

(if known)

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 the nature of debtor's interests 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 the 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.
<p><i>CHARLES HYNN 509 CASA DEL NORTE NORTH LAS VEGAS NEVADA 89130</i></p>	<p>Contract Type: <i>Residential lease</i> Terms: <i>MONTHLY AT \$1,100.00 PER MONTH</i> Beginning date: Debtor's Interest: <i>Lessee</i> Description: Buyout Option: <i>NO</i></p>
<p><i>GARY & KATHERINE HAYES 8900 MONTE ORO DRIVE LAS VEGAS NEVADA 89131</i></p>	<p>Contract Type: <i>Residential lease</i> Terms: <i>MONTHLY AT \$1,400.00 PER MONTH</i> Beginning date: <i>7/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i></p>
<p><i>RICHARD & SHEILA KORMAN 509 CASA DEL NORTE NORTH LAS VEGAS NEVADA 89130</i></p>	<p>Contract Type: <i>Residential lease</i> Terms: <i>MONTHLY AT \$1,100.00 PER MONTH</i> Beginning date: <i>1/1/2002</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i></p>

In re BELL, KATHLEEN / Debtor

Case No. _____
(if known)

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 the 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 debtors 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 the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

In re BELL, KATHLEEN,
Debtor(s)

Case No. _____
(if known)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. 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 22 A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,100.00
a. Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Utilities: a. Electricity and heating fuel	\$	200.00
b. Water and sewer	\$	75.00
c. Telephone	\$	150.00
d. Other CELL PHONE	\$	98.00
Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	150.00
4. Food	\$	350.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	50.00
7. Medical and dental expenses	\$	50.00
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	\$	100.00
b. Life	\$	0.00
c. Health	\$	80.00
d. Auto	\$	65.00
e. Other DISABILITY INSURANCE	\$	140.00
Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage) (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: 8900 MONTE ORO DR. MORTGAGE #1	\$	1,000.00
c. Other:	\$	0.00
Line 13 Continuation Page Total (see continuation page for itemization)	\$	1,600.00
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, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,308.00
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 16 of Schedule I	\$	5,450.00
b. Average monthly expenses from Line 18 above	\$	5,308.00
c. Monthly net income (a. minus b.)	\$	142.00

In re BELL, KATHLEEN,

Case No. _____

Debtor(s)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

(Continuation page)

13. (continuation) OTHER INSTALLMENTS

6560 BEACON ROAD #1

\$ 800.00

509 CASA DEL NORTE

\$ 800.00

Line 13 Continuation Page Total (seen as line item "13" on Schedule J)

\$ 1,600.00

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA

In re: BELL, KATHLEEN

Case No.

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.

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 the 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.

"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 corporation 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.

AMOUNT SOURCE
Year to date: 29,100.00 CARD DEALER - WYNN
Last Year: 46,000.00
Year before: 71,954.00

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, 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.

AMOUNT SOURCE
Year to date: 11,750.00 RENTAL PROPERTIES
Last Year: 22,000.00

AMOUNT

SOURCE

Year before: 22,000.00

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 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 creditor 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
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* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

<i>Creditor: CITI MORTGAGE</i>	<i>4/8/10</i>	<i>1,600.00</i>	<i>92,300.00</i>
<i>Address: P.O. BOX 6006</i>			
<i>THE LAKES, NEVADA 88901-6006</i>			

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 this 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 creditor 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 filed.)

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None 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.)

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 AND LOCATION	STATUS OR DISPOSITION
<i>WELLS FARGO BANK, N.A. VS KATHLEEN BELL</i>	<i>SUMMONS-CIVIL</i>	<i>DISTRICT COURT CLARK COUNTY, NEVADA</i>	<i>UNKNOWN</i>

None 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.)

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.)

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.)

None 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 filed.)

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.)

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.)

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 a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Payee: <i>Thomas E. Crowe</i> Address: 7381 W. Charleston Blvd. Suite 110 Las Vegas, NV 89117	Date of Payment: <i>7/1/10</i> Payor: <i>BELL, KATHLEEN</i>	\$3,539.00
Payee: <i>CONSUMER CREDIT COUNSELING SERVICE OF SOUTHERN NEVADA AND UTAH</i> Address: <i>2650 SOUTH JONES, LAS VEGAS, NEVADA 89146</i>	Date of Payment: <i>6/22/10</i> Payor: <i>KATHLEEN BELL</i>	\$50.00

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.)

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.

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.)

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.)

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.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

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
<i>Debtor: KATHLEEN BEEN Address: 8900 MONTE ORO DRIVE, LAS VEGAS, NEVADA 89131</i>	<i>Name(s): KATHLEEN BELL</i>	<i>10/2004 - 4/2010</i>

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.

17. Environmental Information

None 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 hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law:

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:

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.

None 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 docket number.

18. Nature, location and name of business

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.

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.

[If completed by an individual or individual and spouse]

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 07/07/2010

Signature /s/ BELL, KATHLEEN
of Debtor

Date _____

Signature _____
of Joint Debtor
(if any)

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA

In re BELL, KATHLEEN

Case No.
Chapter 11

Attorney for Debtor: Thomas E. Crowe / Debtor

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
a) For legal services rendered or to be rendered in contemplation of and in connection with this case ... \$ 3,539.00
b) Prior to the filing of this statement, debtor(s) have paid ... \$ 0.00
c) The unpaid balance due and payable is ... \$ 3,539.00
3. \$ 1,039.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and None other
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and None other
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated: None
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows: None

Dated: 07/07/2010

Respectfully submitted,

X /s/ Thomas E. Crowe
Attorney for Petitioner: Thomas E. Crowe
Thomas E. Crowe Professional Law Corp.
7381 W. Charleston Blvd.
Suite 110
Las Vegas NV 89117
702-794-0373
tcrowelaw@yahoo.com

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

In re *BELL, KATHLEEN*

Case No.
Chapter *11*

_____/ Debtor
Attorney for Debtor: *Thomas E. Crowe*

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: *07/07/2010*

/s/ BELL, KATHLEEN
Debtor

BELL, KATHLEEN
8309 CHERRY GLAZE AVENUE
UNIT 201
LAS VEGAS, NEVADA 89145

Thomas E. Crowe
7381 W. Charleston Blvd.
Suite 110
Las Vegas, NV 89117

ALLIED TRUSTEE SERVICES
3721 DOUGLAS BLVD.
SUITE 345
ROSEVILLE, CALIFORNIA 95661

BANK OF AMERICA HOME LOANS
P.O. BOX 10227
VAN NUYS, CALIFORNIA 91410-0227

CARD SERVICES CENTER
DES MOINES, IOWA 50364-0001

CARDIASCULAR CONSULTANTS
2300 CORPORATE CIRCLE DRIVE
SUITE 100
HENDERSON, NEVADA 89074

CARMEL CANYON HOA
P.O. BOX 23159
SAN DIEGO, CALIFORNIA 92193-3159

CHARLES HYNN
509 CASA DEL NORTE
NORTH LAS VEGAS, NEVADA 89130

CHASE
P.O. BOX 94014
PALATINE, ILLINOIS 60094-4014

CHASE
P.O. BOX 78148
PHOENIX, ARIZONA 85062-8148

CITI
DALLAS, TEXAS 75265

CITI FINANCIAL RETAIL SERVICES
P.O. BOX 22060
TEMPE, ARIZONA 85285-2060

CITI MORTGAGE
P.O. BOX 6006
THE LAKES, NEVADA 898901-600

COX COMMUNICATIONS
P.O. BOX 3901
LAS VEGAS, NEVADA 89127-3901

DEPARTMENT OF FINANCE SERV.
400 STEWART AVENUE, CITY HALL
6TH FLOOR
LAS VEGAS, NEVADA 89101

DEPARTMENT OF FINANCIAL SERV.
400 STEWART AVENUE, CITY HALL
6TH FLOOR
LAS VEGAS, NEVADA 89101

GARY & KATHERINE HAYES
8900 MONTE ORO DRIVE
LAS VEGAS, NEVADA 89131

INTERNAL REVENUE SERVICE
OGDEN, UTAH 84201-0030

M & I BANK
P.O. BOX 3201
MILWAUKEE, WISCONSIN 53201-3201

PRIMARY FINANCIAL SERVICES
3115 NORTH 3RD AVENUE
SUITE 112
PHOENIX, ARIZONA 85013

REPUBLIC SERVICES
P.O. BOX 98508
LAS VEGAS, NEVADA 89193-8508

RICHARD & SHEILA KORMAN
509 CASA DEL NORTE
NORTH LAS VEGAS, NEVADA 89130

SUNRISE MOUNTIANVIEW HOSPITAL
3100 NORTH TEYANA WAY
LAS VEGAS, NEVADA 89128-0436

WELLS FARGO

WELLS FARGO
P.O. BOX 10347
DES MOINES, IOWA 50306

WELLS FARGO BANK, N.A.
P.O. BOX 31557
MAC B6955-01B
BILLINGS, MONTANA 59107-9900

WEST ASSET MANAGEMENT, INC.
P.O. BOX 790113
ST. LOUIS, MISSOURI 63179-0113

WOMENS CANCER CENTER
9030 WEST SAHARA
P.O. BOX 295
LAS VEGAS, NEVADA 89117-5744