

Official Form 1 (04/10)

United States Bankruptcy Court DISTRICT OF NEVADA				Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): ECHAGUE, HECTOR ALBERTO			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): 9468			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): 2719 BOISE STREET LAS VEGAS NEVADA			Street Address of Joint Debtor (No. and Street, City, and State):		
ZIPCODE 89121			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 style="width: 100%;"/>		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 REAL ESTATE 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 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. 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). 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). 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 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					
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 type="checkbox"/> \$500,001 to \$1 million <input checked="" 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 <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): ECHAGUE, HECTOR	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed:	Case Number:	Date Filed:	
NONE			
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:	Case Number:	Date Filed:	
NONE			
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition	Exhibit B (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 have delivered to the debtor the notice required by 11 U.S.C. §342(b). <div style="display: flex; justify-content: space-between; align-items: flex-end;"> X <div style="text-align: right;"> 07/14/2010 <small>Date</small> </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 5px;"> Signature of Attorney for Debtor(s) Date </div>		
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 checked="" 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

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

Name of Debtor(s):

ECHAGUE, HECTOR**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

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

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

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

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

X /s/ ECHAGUE, HECTOR

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (if not represented by attorney)

07/14/2010

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed name of Foreign Representative)

07/14/2010

(Date)

Signature of Attorney***X /s/ Thomas E. Crowe**

Signature of Attorney for Debtor(s)

Thomas E. Crowe 3048

Printed Name of Attorney for Debtor(s)

Thomas E. Crowe Professional Law Corp.

Firm Name

7381 W. Charleston Blvd.

Address

Suite 110**Las Vegas NV 89117****702-794-0373**

Telephone Number

07/14/2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided

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

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

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

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

07/14/2010

Date

UNITED STATES BANKRUPTCY COURT

DISTRICT OF NEVADA

In re *ECHAGUE, HECTOR*

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>WELLS FARGO HOME MORTGAGE</i> <i>P.O. BOX 30427</i> <i>LOS ANGELES CALIFORNIA</i> <i>90030-0427</i>	Phone: <i>WELLS FARGO HOME MORTGAGE</i> <i>P.O. BOX 30427</i> <i>LOS ANGELES CALIFORNIA</i> <i>90030-0427</i>	<i>FIRST MORTGAGE</i> <div style="text-align: right;">Value: Net Unsecured:</div>	 <div style="text-align: right;">Value: Net Unsecured:</div>	<i>\$ 267,500.00</i> <div style="text-align: right;"><i>\$ 105,000.00</i> <i>\$ 162,500.00</i></div>
2 <i>U.S. BANK HOME MORTGAGE</i> <i>4801 FREDERICA STREET</i> <i>OWENSBORO KENTUCKY 42301</i>	Phone: <i>U.S. BANK HOME MORTGAGE</i> <i>4801 FREDERICA STREET</i> <i>OWENSBORO KENTUCKY 42301</i>	<i>FIRST MORTGAGE</i> <div style="text-align: right;">Value: Net Unsecured:</div>	 <div style="text-align: right;">Value: Net Unsecured:</div>	<i>\$ 236,800.00</i> <div style="text-align: right;"><i>\$ 88,000.00</i> <i>\$ 148,800.00</i></div>
3 <i>M & T BANK</i> <i>P.O. BOX 62182</i> <i>BALTIMORE MARYLAND</i> <i>21264-2182</i>	Phone: <i>BAYVIEW LOAN SERVICING, LLC</i> <i>P.O. BOX 3042</i> <i>MILWAUKEE WISCONSIN</i> <i>53201-3042</i>	<i>FIRST MORTGAGE</i> <div style="text-align: right;">Value: Net Unsecured:</div>	 <div style="text-align: right;">Value: Net Unsecured:</div>	<i>\$ 265,400.00</i> <div style="text-align: right;"><i>\$ 128,000.00</i> <i>\$ 137,400.00</i></div>
4 <i>WELLS FARGO HOME MORTGAGE</i> <i>P.O. BOX 30427</i> <i>LOS ANGELES CALIFORNIA</i> <i>90030-0427</i>	Phone: <i>WELLS FARGO HOME MORTGAGE</i> <i>P.O. BOX 30427</i> <i>LOS ANGELES CALIFORNIA</i> <i>90030-0427</i>	<i>FIRST MORTGAGE</i> <div style="text-align: right;">Value: Net Unsecured:</div>	 <div style="text-align: right;">Value: Net Unsecured:</div>	<i>\$ 195,400.00</i> <div style="text-align: right;"><i>\$ 83,500.00</i> <i>\$ 111,900.00</i></div>
5 <i>WELLS FARGO BANK, N.A.</i> <i>P.O. BOX 54180</i> <i>LOS ANGELES CALIFORNIA</i> <i>90054-0180</i>	Phone: <i>WELLS FARGO BANK, N.A.</i> <i>P.O. BOX 54180</i> <i>LOS ANGELES CALIFORNIA</i> <i>90054-0180</i>			<i>\$ 97,500.00</i>

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 WELLS FARGO HOME MORTGAGE P.O. BOX 30427 LOS ANGELES CALIFORNIA 90030-0427	Phone: WELLS FARGO HOME MORTGAGE P.O. BOX 30427 LOS ANGELES CALIFORNIA 90030-0427	FIRST MORTGAGE Value: Net Unsecured:		\$ 161,600.00 \$ 97,000.00 \$ 64,600.00
7 WELLS FARGO P.O. BOX 30086 LOS ANGELES CALIFORNIA 90030-0086	Phone: WELLS FARGO P.O. BOX 30086 LOS ANGELES CALIFORNIA 90030-0086	Credit Card Purchases		\$ 10,500.00
8 DISCOVER P.O. BOX 29033 PHOENIX ARIZONA 85038-9033	Phone: DISCOVER P.O. BOX 29033 PHOENIX ARIZONA 85038-9033	Credit Card Purchases		\$ 9,600.00
9 AMERICA EXPRESS P.O. BOX 0001 LOS ANGELES CALIFORNIA 90096-8000	Phone: AMERICA EXPRESS P.O. BOX 0001 LOS ANGELES CALIFORNIA 90096-8000	Credit Card Purchases		\$ 8,600.00
10 U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408	Phone: U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408	Credit Card Purchases		\$ 7,000.00
11 VISA P.O. BOX 60097 CITY OF INDUSTRY CALIFORNIA 91716-0097	Phone: VISA P.O. BOX 60097 CITY OF INDUSTRY CALIFORNIA 91716-0097	Credit Card Purchases		\$ 6,400.00
12 U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408	Phone: U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408	Credit Card Purchases		\$ 3,700.00
13 SAM'S CLUB P.O. BOX 530942 ATLANTA GEORGIA 30353-0942	Phone: SAM'S CLUB P.O. BOX 530942 ATLANTA GEORGIA 30353-0942	Credit Card Purchases		\$ 3,400.00

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)
14 CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014	Phone: CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014	Credit Card Purchases		\$ 2,600.00
15 LOWE'S P.O. BOX 530914 ATLANTA GEORGIA 30353-0914	Phone: LOWE'S P.O. BOX 530914 ATLANTA GEORGIA 30353-0914	Credit Card Purchases		\$ 2,600.00
16 SEARS P.O. BOX 688956 DES IOWA 50368-8956	Phone: SEARS P.O. BOX 688956 DES IOWA 50368-8956	Credit Card Purchases		\$ 2,000.00
17 SEARS P.O. BOX 688956 DES MOINES IOWA 50368-8956	Phone: SEARS P.O. BOX 688956 DES MOINES IOWA 50368-8956	Credit Card Purchases		\$ 1,200.00
18 CASTLEROCK SECURITY 2101 SOUTH ARLINGTON HEIGHTS SUITE 150 ARLINGTON HEIGHT ILLINOIS 60005-4142	Phone: CASTLEROCK SECURITY 2101 SOUTH ARLINGTON HEIGHTS SUITE 150 ARLINGTON HEIGHT ILLINOIS 60005-4142	ALARM SYSTEM		\$ 70.00

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: 7/14/2010Signature /s/ ECHAGUE, HECTORName: ECHAGUE, HECTOR

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA

In re *ECHAGUE, HECTOR*

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	2	\$ 554,500.00		
B-Personal Property	Yes	3	\$ 141,025.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	2		\$ 1,126,700.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 155,170.00	
G-Executory Contracts and Unexpired Leases	Yes	2			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 6,678.00
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 6,336.00
TOTAL		17	\$ 695,525.00	\$ 1,281,870.00	

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA

In re *ECHAGUE, HECTOR*

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 ECHAGUE, HECTOR

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: 7/14/2010Signature /s/ ECHAGUE, HECTOR
ECHAGUE, HECTOR

[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 ECHAGUE, HECTOR

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 of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
3505 THOMAS AVENUE NORTH LAS VEGAS, NEVADA 89030-7462 NV REAL PROPERTY	Fee Simple		\$ 97,000.00	\$ 97,000.00
2451 PALORA AVENUE LAS VEGAS, NEVADA 89121 NV REAL PROPERTY	Fee Simple		\$ 83,500.00	\$ 83,500.00
1937 CINDYSUE STREET LAS VEGAS, NEVADA 89106-1164 NV REAL PROPERTY	Fee Simple		\$ 105,000.00	\$ 105,000.00
2719 BOISE STREET LAS VEGAS, NEVADA 89121 NV REAL PROPERTY	Fee Simple		\$ 88,000.00	\$ 88,000.00
2212 SUNRISE AVENUE LAS VEGAS, NEVADA 89101-5034 NV REAL PROPERTY	Fee Simple		\$ 128,000.00	\$ 128,000.00
40 ACRES IN ELKO NEVADA PARCEL #075-001-097	Fee Simple		\$ 10,000.00	\$ 0.00

In re ECHAGUE, HECTOR

Debtor(s)

Case No. _____

(if known)

SCHEDULE A-REAL PROPERTY

(Continuation Sheet)

Description and Location of Property	Nature of Debtor's Interest in Property	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
6162 NORTH RED PLANET LANE PAHRUMP NEVADA PARCEL# 030-343-04	Fee Simple	\$ 10,000.00	\$ 0.00
40 ACRES IN APACHE, ARIZONA PARCEL #206-75-014-5	Fee Simple	\$ 5,000.00	\$ 0.00
200 ACRES IN HARNEY COUNTY, OREGON PARCEL # 36-29-00-00400 #59525	Fee Simple	\$ 15,000.00	\$ 0.00
CIUDAD REAL III ETAPA, POLIG. 42 LOTE #25		\$ 13,000.00	\$ 0.00
TOTAL \$		554,500.00	

In re ECHAGUE, HECTOR

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.		BANK ACCOUNT NEVADA FEDERAL CREDIT UNION P.O. BOX 15400 LAS VEGAS, NEVADA 89114-5400 #200081820 Location: In debtor's possession		\$ 3,200.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		HOUSEHOLD GOODS Location: In debtor's possession		\$ 2,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
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			

Case No. _____
(if known)

(Continuation Sheet)

Page 2 of 3

Case No. _____
(if known)

(Continuation Sheet)

Total ➡	\$ 141,025.00
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(Report total also on Summary of Schedules.)
Include amounts from any continuation sheets attached.

Case No. _____
(if known)

Debtor claims the exemptions to which debtor is entitled under: ☐ Check if debtor claims a homestead exemption that exceeds \$146,450.*

☒ 11 U.S.C. § 522(b) (3)

Page No. 1 of 1

* 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 ECHAGUE, HECTOR

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 (See Instructions Above.)	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 0976 Creditor # : 1 M & T BANK P.O. BOX 62182 BALTIMORE MARYLAND 21264-2182	04/2010 FIRST MORTGAGE 2212 SUNRISE AVENUE Value: \$ 128,000.00				\$ 265,400.00	\$ 137,400.00
Account No: 0976 Representing: M & T BANK	BAYVIEW LOAN SERVICING, LLC P.O. BOX 3042 MILWAUKEE WISCONSIN 53201-3042 Value:					
Account No: 6897 Creditor # : 2 U.S. BANK HOME MORTGAGE 4801 FREDERICA STREET OWENSBORO KENTUCKY 42301	04/2010 FIRST MORTGAGE 2719 BOISE STREET Value: \$ 88,000.00				\$ 236,800.00	\$ 148,800.00
1 continuation sheets attached	Subtotal \$ (Total of this page) Total \$ (Use only on last page)				\$ 502,200.00	\$ 286,200.00

(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 ECHAGUE, HECTOR, 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 (See Instructions Above.)	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: 1098 Creditor # : 3 WELLS FAGO HOME MORTGAGE P.O. BOX 30427 LOS ANGELES CALIFORNIA 90030-0427	04/2010 FIRST MORTGAGE 2451 PALORA AVENUE Value: \$ 83,500.00				\$ 195,400.00	\$ 111,900.00
Account No: 8731 Creditor # : 4 WELLS FARGO HOME MORTGAGE P.O. BOX 30427 LOS ANGELES CALIFORNIA 90030-0427	04/2010 FIRST MORTGAGE 3505 THOMAS AVENUE Value: \$ 97,000.00				\$ 161,600.00	\$ 64,600.00
Account No: 1867 Creditor # : 5 WELLS FARGO HOME MORTGAGE P.O. BOX 30427 LOS ANGELES CALIFORNIA 90030-0427	04/2010 FIRST MORTGAGE 1937 CINDYSUE STREET Value: \$ 105,000.00				\$ 267,500.00	\$ 162,500.00
Account No:	Value:					
Account No:	Value:					
Account No:	Value:					
Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims	Subtotal \$ (Total of this page) Total \$ (Use only on last page)				\$ 624,500.00 \$ 1,126,700.00	\$ 339,000.00 \$ 625,200.00

(Report also on Summary of Schedules.)

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

In re ECHAGUE, HECTOR

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.

No continuation sheets attached

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

In re ECHAGUE, HECTOR,Case No. _____
(if known)

Debtor(s)

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	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 4002 Creditor # : 1 AMERICA EXPRESS P.O. BOX 0001 LOS ANGELES CALIFORNIA 90096-8000		Credit Card Purchases				\$ 8,600.00
Account No: 2575 Creditor # : 2 CASTLEROCK SECURITY 2101 SOUTH ARLINGTON HEIGHTS SUITE 150 ARLINGTON HEIGHT ILLINOIS 60005-4142		ALARM SYSTEM				\$ 70.00
Account No: 7161 Creditor # : 3 CHASE P.O. BOX 94014 PALATINE ILLINOIS 60094-4014		Credit Card Purchases				\$ 2,600.00
Account No: 7881 Creditor # : 4 DISCOVER P.O. BOX 29033 PHOENIX ARIZONA 85038-9033		Credit Card Purchases				\$ 9,600.00
2 continuation sheets attached						Subtotal \$
						\$ 20,870.00
						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 ECHAGUE, HECTOR,Case No. _____
(if known)

Debtor(s)

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	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 6529						\$ 2,600.00
Creditor # : 5 LOWE'S P.O. BOX 530914 ATLANTA GEORGIA 30353-0914		Credit Card Purchases				
Account No: 5119						\$ 3,400.00
Creditor # : 6 SAM'S CLUB P.O. BOX 530942 ATLANTA GEORGIA 30353-0942		Credit Card Purchases				
Account No: 2260						\$ 2,000.00
Creditor # : 7 SEARS P.O. BOX 688956 DES IOWA 50368-8956		Credit Card Purchases				
Account No: 1673						\$ 1,200.00
Creditor # : 8 SEARS P.O. BOX 688956 DES MOINES IOWA 50368-8956		Credit Card Purchases				
Account No: 0719						\$ 3,700.00
Creditor # : 9 U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408		Credit Card Purchases				
Account No: 0691						\$ 7,000.00
Creditor # : 10 U.S. BANK P.O. BOX 790408 ST. LOUIS MISSOURI 63179-0408		Credit Card Purchases				

Sheet No. 1 of 2 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 19,900.00

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

(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 ECHAGUE, HECTOR

/ 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.
BERNADE CASILLAS 2451 PALORA AVENUE LAS VEGAS NEVADA 89121	Contract Type: <i>Residential lease</i> Terms: <i>1 YEAR LEASE AT \$1,100.00 per month</i> Beginning date: <i>1/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>no</i>
E. JUAN HERNANDEZ 2212 SUNRISE AVENUE #7 LAS VEGAS NEVADA 89101	Contract Type: <i>Real estate sales contract</i> Terms: <i>6 MONTHS AT \$450.00 PER MONTH</i> Beginning date: <i>1/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>
EFRIN HERNANDEZ 1937 CINDYSUE STREET # 1 LAS VEGAS NEVADA 89106	Contract Type: <i>Residential lease</i> Terms: <i>6 MONTHS AT \$700.00 PER MONTH</i> Beginning date: <i>1/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>
ENRIGUE SAMPAYO 2212 SUNRISE AVENUE #5 LAS VEGAS NEVADA 89101	Contract Type: <i>Residential lease</i> Terms: <i>3 MONTHS AT \$450.00 PER MONTH</i> Beginning date: <i>7/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>
LAURA CHRIST 3505 THOMAS AVENUE #2 LAS VEGAS NEVADA 89030	Contract Type: <i>Residential lease</i> Terms: <i>6 MONTHS AT \$500.00 PER MONTH</i> Beginning date: <i>1/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>

In re ECHAGUE, HECTOR

/ Debtor

Case No. _____

(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND 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.
OSCAR & ADAM SAMPAYO 2212 SUNRISE AVENUE #6 LAS VEGAS NEVADA 89101	Contract Type: <i>Residential lease</i> Terms: <i>3 MONTHS AT \$450.00 PER MONTH</i> Beginning date: <i>7/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>
SAMUEL RUVALCABA 3323 SUNRISE AVENUE #1 LAS VEGAS NEVADA 89101	Contract Type: <i>Residential lease</i> Terms: <i>6 MONTHS AT \$350.00 PER MONTH</i> Beginning date: <i>6/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>
TOMASA SAN JUAN 1937 CINDYSUE STRET #2 LAS VEGAS NEVADA 89106	Contract Type: <i>Residential lease</i> Terms: <i>6 MONTHS AT \$600.00 PER MONTH</i> Beginning date: <i>1/1/2010</i> Debtor's Interest: <i>Lessor</i> Description: Buyout Option: <i>NO</i>

In re ECHAGUE, HECTOR

Debtor(s)

Case No. _____

(if known)

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: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): SON SON	AGE(S): 17 21
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation	BANQUET FOOD SERVER	
Name of Employer	HARRAH'S ENTERTAINMENT	
How Long Employed	13 YEARS	
Address of Employer	3700 WEST FLAMINGO LAS VEGAS NEVADA 89121	
INCOME: (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ 3,182.00	\$ 0.00
2. Estimate monthly overtime	\$ 573.00	\$ 0.00
3. SUBTOTAL	\$ 3,755.00	\$ 0.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ 245.00	\$ 0.00
b. Insurance	\$ 0.00	\$ 0.00
c. Union dues	\$ 42.00	\$ 0.00
d. Other (Specify): SRP LOAN	\$ 760.00	\$ 0.00
SRPB PTAX	\$ 190.00	\$ 0.00
SRPS TAX	\$ 440.00	\$ 0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 1,677.00	\$ 0.00
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 2,078.00	\$ 0.00
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ 0.00	\$ 0.00
8. Income from real property	\$ 4,600.00	\$ 0.00
9. Interest and dividends	\$ 0.00	\$ 0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
11. Social security or government assistance (Specify):	\$ 0.00	\$ 0.00
12. Pension or retirement income	\$ 0.00	\$ 0.00
13. Other monthly income (Specify):	\$ 0.00	\$ 0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 4,600.00	\$ 0.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ 6,678.00	\$ 0.00
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ 6,678.00	
(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:

MY INCOME WILL BE DECREASING BECAUSE IN MY DEPARTMENT AS BANQUET FOOD SERVER WORK IS VERY SLOW.

In re ECHAGUE, HECTOR / DebtorCase 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 ECHAGUE, HECTOR,

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)	\$	1,680.00
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
2. Utilities: a. Electricity and heating fuel	\$	160.00
b. Water and sewer	\$	330.00
c. Telephone	\$	190.00
d. Other SEWER	\$	230.00
Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	400.00
4. Food	\$	500.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	0.00
8. Transportation (not including car payments)	\$	400.00
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	\$	156.00
e. Other PROPERTY INSURANCE (SUNRISE)	\$	190.00
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: PROJECTED PLAN PAYMENTS FOR	\$	0.00
c. Other: SECURED DEBTS	\$	2,000.00
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.)	\$	6,336.00
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	\$	6,678.00
b. Average monthly expenses from Line 18 above	\$	6,336.00
c. Monthly net income (a. minus b.)	\$	342.00

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

In re **ECHAGUE, HECTOR**

Case No.
Chapter **11**

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

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	\$	8,539.00
b) Prior to the filing of this statement, debtor(s) have paid	\$	8,539.00
c) The unpaid balance due and payable is	\$	0.00
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: **07/14/2010**

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 *ECHAGUE, HECTOR*

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: *07/14/2010*

/s/ ECHAGUE, HECTOR
Debtor

ECHAGUE, HECTOR
2719 BOISE STREET
LAS VEGAS, NEVADA 89121

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

AMERICA EXPRESS
P.O. BOX 0001
LOS ANGELES, CALIFORNIA 90096-8000

BAYVIEW LOAN SERVICING, LLC
P.O. BOX 3042
MILWAUKEE, WISCONSIN 53201-3042

CASTLEROCK SECURITY
2101 SOUTH ARLINGTON HEIGHTS
SUITE 150
ARLINGTON HEIGHT, ILLINOIS 60005-4142

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

DISCOVER
P.O. BOX 29033
PHOENIX, ARIZONA 85038-9033

LOWE'S
P.O. BOX 530914
ATLANTA, GEORGIA 30353-0914

M & T BANK
P.O. BOX 62182
BALTIMORE, MARYLAND 21264-2182

SAM'S CLUB
P.O. BOX 530942
ATLANTA, GEORGIA 30353-0942

SEARS
P.O. BOX 688956
DES, IOWA 50368-8956

SEARS
P.O. BOX 688956
DES MOINES, IOWA 50368-8956

U.S. BANK
P.O. BOX 790408
ST. LOUIS, MISSOURI 63179-0408

U.S. BANK HOME MORTGAGE
4801 FREDERICA STREET
OWENSBORO, KENTUCKY 42301

VISA
P.O. BOX 60097
CITY OF INDUSTRY, CALIFORNIA 91716-0097

WELLS FAGO HOME MORTGAGE
P.O. BOX 30427
LOS ANGELES, CALIFORNIA 90030-0427

WELLS FARGO
P.O. BOX 30086
LOS ANGELES, CALIFORNIA 90030-0086

WELLS FARGO BANK, N.A.
P.O. BOX 54180
LOS ANGELES, CALIFORNIA 90054-0180

WELLS FARGO HOME MORTGAGE
P.O. BOX 30427
LOS ANGELES, CALIFORNIA 90030-0427