B1 (Official Form 1) (1/08)

| United S Northe | Voluntar | Voluntary Petition | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|
| Name of Debtor (if individual, enter Last, First, Shamrock House, Inc. | Middle): | Name of Jo | bint Debtor (Spouse) (Last, Fir | st, Middle): | | | | | | |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): None | years | | 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-Taxpay (if more than one, state all): EIN: 14-15839 | | | gits of Soc. Sec. or Individual- n one, state all): | Taxpayer I.D. (IT | IN) No./Complete EIN | | | | | |
| Street Address of Debtor (No. and Street, City, 2388 Rte 145 | Street, City, and St | ate | | | | | | | | |
| East Durham, NY | | | | | | | | | | |
| County of Residence or of the Principal Place of | Business: | County of | Residence or of the Principal F | Place of Business: | | | | | | |
| Greene (Albany) | | | | | | | | | | |
| Mailing Address of Debtor (if different from stree P.O. Box 38 East Durham, NY | et address): | Mailing A | ldress of Joint Debtor (if differ | rent from street ad | dress): | | | | | |
| | ZIPCODE 12423 | | | | ZIPCODE | | | | | |
| Location of Principal Assets of Business Debtor | (if different from street addres | ss above): | | | ZIPCODE | | | | | |
| East Durham, NY | Noture of Pusing | 20 | Chapter of Pa | nkmuntav Codo I | <u>???~????</u> | | | | | |
| Type of Debtor Nature of Business Chapter of Bankruptcy Code U (Form of Organization) (Check one box) the Petition is Filed (Check Individual (includes Joint Debtors) Health Care Business Chapter 7 Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) Chapter 9 Chapter 15 P Partnership Other (If debtor is not one of the above entities, check thic hor and state ture of active below.) Stockbroker Chapter 12 Chapter 15 P Other (If debtor is not one of the above entities, check thic hor and state ture of active below.) Clearing Bank Nonmain Process | | | | | | | | | | |
| check this box and state type of entity below.) | Clearing Bank Other Inn and Resort Facil Tax-Exempt E (Check box, if app Debtor is a tax-exempt under Title 26 of the Un Code (the Internal Revo | ntity licable) organization nited States | Na (Cl Debts are primarily debts, defined in 11 \$101(8) as "incurrec individual primarily personal, family, or purpose." | U.S.C. V l by an for a | Debts are primarily business debts | | | | | |
| Filing Fee (Check one b Full Filing Fee attached | pox) | | eck one box: Chapter 11 Debtor is a small business as of | | C & 101(51D) | | | | | |
| Filing Fee to be paid in installments (Applic. signed application for the court's consideration to pay fee except in installments. Rule 1006 Filing Fee waiver requested (applicable to chattach signed application for the court's consideration for the court's consideration. | on certifying that the debtor is (b). See Official Form No. 34 napter 7 individuals only). Mu | st attach unable A. Ist | Debtor is not a small business as of Debtor is not a small business eck if: Debtor's aggregate noncontin owed to insiders or affiliates) eck all applicable boxes A plan is being filed with this Acceptances of the plan were more classes, in accordance w | as defined in 11 U gent liquidated del are less than \$2,19 petition. solicited prepetitio | J.S.C. § 101(51D) bts (excluding debts 00,000 - | | | | | |
| Statistical/Administrative Information Debtor estimates that funds will be available for dis Debtor estimates that, after any exempt property is | | ess paid there wil | l be no funds available for | | THIS SPACE IS FOR COURT USE ONLY | | | | | |
| distribution to unsecured creditors. | excluded and administrative expen | ises paid, there will | toe no funds available for | | | | | | | |
| Estimated Number of Creditors Image: Straight of Creditors Image: Straight of Creditors I-49 50-99 Image: Straight of Creditors | 0 1000- 5,001- 5000 10,000 | 10,001- 25,000 | 25,001- 50,000 100,000 | Over 100,000 | | | | | | |
| Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,000 \$50,000 \$100,000 \$500,000 to \$1 million | 1 \$1,000,001 \$10,000,0 to \$10 to \$50 million million | 01 \$50,000,001 to \$100 million | \$100,000,001 \$500,000,00 to \$500 to \$1 billion million | 1 More than \$1 billion | | | | | | |
| Estimated Liabilities \$0 to \$50,001 to \$100,001 to \$500,00 \$50,000 \$100,000 \$500,000 to \$1 million | 1 \$1,000,001 \$10,000,0 to \$10 to \$50 million million | 01 \$50,000,001 to \$100 million | \$100,000,001 \$500,000,00 to \$500 to \$1 billion million | 1 More than \$1 billion | | | | | | |

B1 (Official Form 1) (1/08)

| B1 (Official For | rm 1) (1/08) | | Page 2 | | | | | |
|---|--|--|---|--|--|--|--|--|
| Voluntary Pe (This page must be | t ition e completed and filed in every case) | Name of Debtor(s): Shamrock House, Inc. | | | | | | |
| | 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: | N.A. | Case Number: | Date Filed: | | | | | |
| | nkruptcy Case Filed by any Spouse, Partner | or Affiliate of this Debtor (If more th | an one, attach additional sheet) | | | | | |
| Name of Debtor: | NONE | Case Number: | Date Filed: | | | | | |
| District: | | Relationship: | Judge: | | | | | |
| 10K and 10Q) with Section 13 or 15(d) relief under chapte | Exhibit A if debtor is required to file periodic reports (e.g., forms in the Securities and Exchange Commission pursuant to) of the Securities Exchange Act of 1934 and is requesting r 11) is attached and made a part of this petition. | Exhil (To be completed if de whose debts are prima I, the attorney for the petitioner named in the for the petitioner that [he or she] may proceed under States Code, and have explained the relief availa I further certify that I delivered to the debtor the X Signature of Attorney for Debtor(s) | bbor is an individual rily consumer debts) egoing petition, declare that I have informed r chapter 7, 11, 12, or 13 of title 11, United ible under each such chapter. | | | | | |
| | T-1. | bit C | | | | | | |
| | In or have possession of any property that poses or is alleged exhibit C is attached and made a part of this petition. | | harm to public health or safety? | | | | | |
| Exhibit D If this is a joint pe | l by every individual debtor. If a joint petition is filed, each D completed and signed by the debtor is attached and made a | a part of this petition. | khibit D.) | | | | | |
| | | arding the Debtor - Venue any applicable box) | | | | | | |
| ☑ | Debtor has been domiciled or has had a residence, princi immediately preceding the date of this petition or for a lo | pal place of business, or principal assets in this | | | | | | |
| | There is a bankruptcy case concerning debtor's affiliate, | general partner, or partnership pending in this | District. | | | | | |
| | Debtor is a debtor in a foreign proceeding and has its prin or has no principal place of business or assets in the Unit court] in this District, or the interests of the parties will b | ed States but is a defendant in an action or pro- | ceeding [in federal or state | | | | | |
| | Certification by a Debtor Who Resi (Check all ap | des as a Tenant of Residential Prop oplicable boxes) | perty | | | | | |
| | Landlord has a judgment for possession of debtor's resid | ence. (If box checked, complete the following | .) | | | | | |
| | (Name of | landlord that obtained judgment) | | | | | | |
| | (Address | of landlord) | | | | | | |
| | | v, there are circumstances under which the debtor would be permitted to cure the or possession, after the judgment for possession was entered, and | | | | | | |
| | Debtor has included in this petition the deposit with the operiod after the filing of the petition. | court of any rent that would become due during | g the 30-day | | | | | |
| | Debtor certifies that he/she has served the Landlord with | this certification. (11 U.S.C. § 362(1)). | | | | | | |

| B1 (Official Form 1) (1/08) | Page 3 |
|---|---|
| Voluntary Petition | Name of Debtor(s): |
| (This page must be completed and filed in every case) | Shamrock House, Inc. |
| Signa | |
| 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 Signature of Debtor X Signature of Joint Debtor | 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 § 1515 of title 11 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) |
| Signature of Joint Debtor Telephone Number (If not represented by attorney) Date | (Printed Name of Foreign Representative) (Date) |
| Signature of Attorney* X /s/ Richard Croak Signature of Attorney for Debtor(s) RICHARD CROAK 101428 Printed Name of Attorney for Debtor(s) Richard Croak Firm Name 314 Great Oaks Blvd. Address Albany, NY 12203 518-690-4410 rcroak@richardcroak.com Telephone Number e-mail June 23, 2009 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 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 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before 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.) |
| Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ John J. Kellegher Signature of Authorized Individual JOHN J. KELLEGHER Printed Name of Authorized Individual President Title of Authorized Individual June 23, 2009 Date Date | X Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156. |

UNITED STATES BANKRUPTCY COURT Northern District of New York

In re Shamrock House, Inc.

Debtor

Case No.

Chapter _____11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

| (1) | (2) | (3) | (4) | (5) |
|----------------------------------|--|---------------------------------------|---------------------------------------|--|
| Name of creditor | Name, telephone number and | Nature of claim | Indicate if | Amount of claim |
| and complete mailing address | complete mailing address, | (trade debt, bank loan, government | claim is contingent, unliquidated, | [if secured also state value of security] |
| including zip code | including zip code, of employee, agent, or department of creditor | contract, etc. | disputed or | state value of security |
| | familiar with claim who may be contacted | , | subject to setoff | |
| ohn J. Kellegher 2389 Rte 145 | | | | 49,000.00 |
| East Durham, NY 2423 | | | | |
| Citi Card | | | | 39,112.58 |
| P.O. Box 183051 | | | | |
| Columbus, OH 43218 | | | | |
| Aichael Oveis | | | | 35,000.00 |
| 1 Oldert Dr. | | | | |
| Pearl River, NY | | | | |
| .0965 | | | | |

| (1) Name of creditor and complete mailing address including zip code | (2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | (3) Nature of claim (trade debt, bank loan, government contract, etc. | (4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff | (5) Amount of claim [if secured also state value of security] |
|---|--|---|---|--|
| Worker's Compensation Board 20 Park St Rm 301 Albany, NY 12207 | | | Disputed | 9,000.00 |
| NYS Dept of Tax and Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205 | | | | 9,000.00 |
| Lucy Kammerer Rte 20 Box 204 East Durham, NY 12423 | | | | 5,000.00 |
| Katherine Kelly 253 Bullock Rd. Slingerlands, NY | | | | 2,000.00 |

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-738 - 30128 - Adobe PDF 12159

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] named as debtor in this case, declare under penalty of perjury that I have read the foregoing LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS and that it is true and correct to the best of my information and belief.

June 23, 2009 Date

Signature

/s/ John J. Kellegher

JOHN J. KELLEGHER, President

Debtor

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 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 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 husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

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

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

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

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|-------------------------------------|--|------------|----------------|----------|---|---------------------------------|
| ACCOUNT NO. | | | | | | | | |
| Gaffken & Barriger c/o Jay L. Zeiger P.O. Box 30 Woodbourne, NY 12788 | | | VALUE \$ 0.00 | | | | Notice Only | Notice Only |
| ACCOUNT NO. | | | Lien: First Mortgage | | | | | |
| Jay L. Zeiger, Esq. Kalter, Kaplan Zeiger & Forman 6166 State Rte 42 Woodbourne, NY 12788 | | | Security: Real Property VALUE \$ 720,000.00 | | | x | 514,095.78 | 0.00 |
| ACCOUNT NO. | + | | Lien: Tax lien | | | | | |
| NYS Dept of Tax and Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205 | | | Security: Real Estate | | | | 6,525.53 | 0.00 |
| | | | VALUE \$ 1,200,000.00 | | | , | | |
| continuation sheets attached | | | (Total | of th | otota is pa | (ge | \$ 520,621.31 | \$ 0.00 |
| | | | (Use only o | on la | Fota st pa | (ge | \$ | \$ |
| (Report also on (If applicable, report Summary of Schedules) also on Statistical Summary of Certain | | | | | | | | |

also on Statistical Summary of Certain Liabilities and Related Data.) In re _____Shamrock House, Inc.____

Case No.

Debtor

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

____,

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|-------------------------------------|--|------------|--------------|----------|---|---|
| ACCOUNT NO. | | | Lien: real property tax | | | | | |
| Town of Durham 7309 Rte 81 East Durham, NY 12423 | | | Security: Real Property | | | | 17,573.32 | 0.00 |
| ACCOUNT NO. | | | VALUE \$ 854,000.00 | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | VALUE \$ | - | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| Sheet no. <u>1</u> of <u>1</u> continuation sheets attached Schedule of Creditors Holding Secured Claims | l to | | Su | btot | al (s |)> | \$ 17,573.32 | \$ 0.00 |
| Senerate of Creators froming Secured Clalins | | | (Total(s) o (Use only o | Т | otal | (s) | \$ 538,194.63 | \$ 0.00 |
| | | | | | r pu | | (Report also on Summary of Schedule | (If applicable, rep es) also on Statistical Summary of Cert Liabilities and Re Data |

Data.)

Debtor

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

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

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

Domestic Support Obligations

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

Extensions of credit in an involuntary case

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

V 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 \$10,950* 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).

B6E (Official Form 6E) (12/07) - Cont.

| In re | Shamrock House, Inc. | Case |
|-------|----------------------|------|
| | Debtor | |

No. (if known)

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* 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 \$2,425* 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).



П

Taxes and Certain Other Debts Owed to Governmental Units

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

Commitments to Maintain the Capital of an Insured Depository Institution

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

Claims for Death or Personal Injury While Debtor Was Intoxicated

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

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

2

Debtor

Case No. ___

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet) Sec. 507(a)(4)

Type of Priority for Claims Listed on This Sheet

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | 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. | | | Consideration: Wages | | | | | | |
| Eileen F. Kellegher 2389 Rte 145 East Durham, NY 12423 | | | | | | | 49,000.00 | 4,500.00 | 44,500.00 |
| ACCOUNT NO. | | | Consideration: | | | | | | |
| John J. Kellegher 2389 Rte 145 East Durham, NY 12423 | | | Collection Account | | | | 49,000.00 | 4,500.00 | 44,500.00 |
| ACCOUNT NO. | | | Consideration: Wages | | | | | | |
| Neil K. Kellegher 2404 Rte 145 East Durham, NY 12423 | | | | | | | 20,000.00 | 4,500.00 | 15,500.00 |
| ACCOUNT NO. | \vdash | | | | | | | | |
| | | | | | | | | | |
| Sheet no. $\frac{1}{2}$ of $\frac{2}{2}$ continuation sheets attached Creditors Holding Priority Claims | to S | chedul | le of (Totals of t | bto his | | | \$ 118,000.00 | ^{\$} 13,500.00 | ^{\$} 104,500.00 |
| | | Sche | To e only on last page of the comp edule E.) Report also on the Su chedules) | | | > | \$ | | |
| | | Sche the S | T e only on last page of the comp edule E. If applicable, report al Statistical Summary of Certain vilities and Related Data.) | so o | ł | > | \$ | \$ | \$ |

Debtor

Case No. ___

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

_,

(Continuation Sheet) Sec. 507(a)(8)

Type of Priority for Claims Listed on This Sheet

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | 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. | | | Consideration: Sales | | | | | | |
| NYS Dept of Tax and Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205 | | | Taxes | | | | 9,000.00 | 0.00 | 9,000.00 |
| ACCOUNT NO. | | | | | | | | | |
| | | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | | | | | | | | | |
| Sheet no. $\frac{2}{2}$ of $\frac{2}{2}$ continuation sheets attached | to S | chedul | e of (Totals of | ıbto this | lai | ► e) | \$ 9,000.00 | \$ | \$ |
| Creditors Holding Priority Claims | | Sche | | otal leteo | 1 | > | \$ 127,000.00 | | |
| | | Sche the S | T conly on last page of the comp edule E. If applicable, report al Statistical Summary of Certain ilities and Related Data.) | so o | 1 | > | \$ | \$ 13,500.00 | \$113,500.00 |

In re _____ Shamrock House, Inc.

Case No. _

(If known)

Debtor

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|--|------------|--------------|----------|-----------------------|
| ACCOUNT NO. | | | | | | | |
| | | | | | | | 0.00 |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | 0.00 |
| | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | 0.00 |
| | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | 0.00 |
| | | | | | | | |
| | | | | | | | |
| continuation sheets attached | | | S | | otal | | \$ 0.00 |
| | | | (Use only on last page of the completed Sch | | otal e F | | \$ |

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

Debtor

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.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|---------------|----------|-----------------------|
| ACCOUNT NO. | | | | | | | 0.00 |
| ACCOUNT NO. Citi Card P.O. Box 183051 Columbus, OH 43218 | | | Consideration: Credit card debt | | | | 39,112.58 |
| ACCOUNT NO. James F. Byrne, Esq. 750 Main St. Suite 1500 Hartford, CT 06103 | • | | Consideration: Lease Lease rejection claim | | | | Notice Only |
| ACCOUNT NO. Katherine Kelly 253 Bullock Rd. Slingerlands, NY 12159 | | | Consideration: Personal loan | | | | 2,000.00 |
| ACCOUNT NO. Lucy Kammerer Rte 20 Box 204 East Durham, NY 12423 | | | Consideration: Wages | | | | 5,000.00 |
| Sheet no. 1 of 2 continuation sheets attact to Schedule of Creditors Holding Unsecured Nonpriority Claims | ched | | | | tota 'otal | | \$ 46,112.58 \$ |

(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 Data.)

Debtor

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.) | CODEBTOR | HUSBAND, WIFE, JOINT ORCOMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------------------------------------|---|------------|--------------|---------------|-----------------------|
| ACCOUNT NO. | Γ | | Consideration: Personal loan | | | | |
| Michael Oveis 21 Oldert Dr. Pearl River, NY 10965 | | | | | | | 35,000.00 |
| ACCOUNT NO. | ┢ | | Consideration: Penalty assessment | | | | |
| Worker's Compensation Board 20 Park St Rm 301 Albany, NY 12207 | | | | | | X | 9,000.00 |
| ACCOUNT NO. | ┢ | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | ┢ | | | | ┝ | ┢ | |
| | | | | | | | |
| Sheet no. <u>2</u> of <u>2</u> continuation sheets atta to Schedule of Creditors Holding Unsecured | ched | | | Sub | tota | 1 > | \$ 44,000.00 |
| Nonpriority Claims Total ► (Use only on last page of the completed Schedule F.) | | | | | | \$ 90,112.58 | |

(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 Data.)

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 nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

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

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|---|
| Durham Valley liquor Store | Retail store lease |
| 2388 Rte 45 East Durham, NY 12423 | Lease on nonresidential real property |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Shamrock House, Inc.

In re

Debtor

Case No. (If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

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

Date _____

Date _____

Debtor:

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

Signature:

Signature: _____

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address Х

Signature of Bankruptcy Petition Preparer

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 signed 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.

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

I, the <u>President</u> [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the Shamrock House, Inc. [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <u>18</u> sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____ June 23, 2009

Signature: /s/ John J. Kellegher

JOHN J. KELLEGHER

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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

Social Security No.

(Required by 11 U.S.C. § 110.)

Date

Citi Card P.O. Box 183051 Columbus, OH 43218

Durham Valley liquor Store 2388 Rte 45 East Durham, NY 12423

Eileen F. Kellegher 2389 Rte 145 East Durham, NY 12423

Gaffken & Barriger c/o Jay L. Zeiger P.O. Box 30 Woodbourne, NY 12788

James F. Byrne, Esq. 750 Main St. Suite 1500 Hartford, CT 06103

Jay L. Zeiger, Esq. Kalter, Kaplan Zeiger & Forman 6166 State Rte 42 Woodbourne, NY 12788

John J. Kellegher 2389 Rte 145 East Durham, NY 12423

Katherine Kelly 253 Bullock Rd. Slingerlands, NY 12159

Lucy Kammerer Rte 20 Box 204 East Durham, NY 12423

Michael Oveis 21 Oldert Dr. Pearl River, NY 10965 Neil K. Kellegher 2404 Rte 145 East Durham, NY 12423

NYS Dept of Tax and Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205

Town of Durham 7309 Rte 81 East Durham, NY 12423

Worker's Compensation Board 20 Park St Rm 301 Albany, NY 12207

UNITED STATES BANKRUPTCY COURT Northern District of New York

In re Shamrock House, Inc.

June 23, 2009

Debtor

Case No.

Chapter _____

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 2 pages, is true,

correct and complete to the best of my knowledge.

Date

Signature

/s/ John J. Kellegher

JOHN J. KELLEGHER, President

Richard Croak Richard Croak 314 Great Oaks Blvd. Albany, NY 12203 518-690-4410 518-690-4435

UNITED STATES BANKRUPTCY COURT Northern District of New York

| In re <u>Shamrock House, Inc.</u> | Debtor | , Case No. Chapter | 11 | |
|--|-----------|------------------------|-----------------------------|---|
| Holder of Security | List of E | Quity Security Holders | Type of Interest | |
| Holder of Security | | Nulliber Registered | Type of interest | _ |
| John J. Kellegher 2389 Rte 145 East Durham, NY 12423 | | | Shareholder officer partner | |
| Neil K. Kellegher 2404 Rte 145 | | | Shareholder Officer Partner | |

East Durham, NY 12423