B1 (Official Form 1)(12/11)											
	United S West		Bankı strict of						Volu	ntary	Petition
Name of Debtor (if individual, enter Last, First, Middle): McClure Dental Services, PC				Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					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 Ind (if more than one, state all) 16-1600947	ividual-Taxpa	yer I.D. (I	TIN) No./O	Complete E	IN Last fo	our digits of than one, state	f Soc. Sec. or	r Individual-7	Гахрауег I.D.	(ITIN) No	./Complete EIN
Street Address of Debtor (No. and 84 W. Utica Street Buffalo, NY	Street, City, a	nd State):				Address of	Joint Debtor	(No. and Str	reet, City, and	l State):	
			Г.	ZIP Code	:						ZIP Code
County of Residence or of the Prir	cipal Place of	Business		14209	Count	y of Reside	ence or of the	Principal Pla	ace of Busines	ss:	
Mailing Address of Debtor (if diffe	erent from stre	et address	s):		Mailir	g Address	of Joint Debt	tor (if differe	nt from street	address):	
			_	ZIP Code	:						ZIP Code
Location of Principal Assets of Bu (if different from street address abo	siness Debtor ove):										
Type of Debtor				of Business	1				otcy Code Un		h
See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)			(Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as defi in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other		s defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	hapter 15 Peti a Foreign Ma hapter 15 Peti a Foreign No	tion for Re ain Proceed tion for Re	ding ecognition
Chapter 15 Debtors Country of debtor's center of main into		Tax-Exempt Entity (Check box, if applicable)		e)		are primarily co	(Check onsumer debts,	e of Debts k one box)		are primarily	
Each country in which a foreign proce by, regarding, or against debtor is pend		under	or is a tax-ex Title 26 of (the Interna	the United S	tates	ates "incurred by an individual prima				busine	ss debts.
,	check one box)			one box:		_	ter 11 Debt			
☐ 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 Debtor.				Debtor is not if: Debtor's aggrare less than	a small busing regate noncount \$2,343,300 (a)	ntingent liquida	defined in 11 U	J.S.C. § 101(51 cluding debts ov	wed to inside	ers or affiliates) years thereafter).	
attach signed application for the court's consideration. See Official Form 3B.				A plan is bein Acceptances	ng filed with of the plan w			one or more cl	lasses of cre-	ditors,	
Statistical/Administrative Inform ■ Debtor estimates that funds wil □ Debtor estimates that, after any there will be no funds available	l be available exempt prope	erty is exc	luded and	administrat		es paid,		THIS	SPACE IS FO	R COURT U	JSE ONLY
Estimated Number of Creditors	200-] 1,000- 5,000	5,001- 10,000	10,001- 25,000	□ 25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets So to \$50,000 to \$100,000 \$500,000	\$500,001 S to \$1 t	31,000,001 o \$10 nillion	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Liabilities	\$500,001	51,000,001 o \$10 nillio	\$10,000,001 to \$50 million	\$50,000,001 to \$100	to \$500	\$500,000,001 to \$1 billion		E/40 40:	FC.47	Dees !	Main

B1 (Official Form 1)(12/11) Page 2

Voluntary Petition		Name of Debtor(s): McClure Dental Services, PC			
(This page must be completed and filed in every case)		State Bettal est vices, i e			
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two,	attach additional sheet)		
Location Where Filed: •	- None -	Case Number:	Date Filed:		
Location Where Filed:		Case Number:	Date Filed:		
Pen	ding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If	more than one, attach additional sheet)		
Name of Debto - None -	r:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A	(To be completed if debtor is a	Exhibit B		
forms 10K an pursuant to Se and is request	eted if debtor is required to file periodic reports (e.g., ad 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.) A is attached and made a part of this petition.	(To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).			
L Lamoit 1	Tis diagened and made a part of any pediaon.	XSignature of Attorney fo	r Debtor(s) (Date)		
	Exh own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	ibit C pose a threat of imminent and i	dentifiable harm to public health or safety?		
		ibit D			
_	eted by every individual debtor. If a joint petition is filed, each completed and signed by the debtor is attached and made a	-	d attach a separate Exhibit D.)		
If this is a join		i part of this petition.			
_	D also completed and signed by the joint debtor is attached a	nd made a part of this petiti	on.		
Information Regarding the Debtor - Venue					
•	(Check any ap Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for	l place of business, or princ			
	There is a bankruptcy case concerning debtor's affiliate, ge				
	Certification by a Debtor Who Reside (Check all appl		al Property		
	Landlord has a judgment against the debtor for possession	*	c checked, complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlord)	<u> </u>			
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f				
	Debtor has included in this petition the deposit with the coafter the filing of the petition.		•		
Cas	Debtor certifies that he/she has served the Landlord with the second second second served the Landlord with the second se	nis certification. (11 U.S.C. §	§ 362(1)). 5/12 13:56:17 Desc Main		
_ a	Document	Page 2 of 8	ortz to.oo. tr Bood Wall		

B1 (Official Form 1)(12/11)

Page 3

Voluntary Petition

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

Manic of Decioi(s)

McClure Dental Services, PC

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

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ FREDERICK J. GAWRONSKI

Signature of Attorney for Debtor(s)

FREDERICK J. GAWRONSKI 2767549

Printed Name of Attorney for Debtor(s)

COOK & GAWRONSKI, P.C.

Firm Name

OLYMPIC TOWERS 300 PEARL STREET, STE. 335 BUFFALO, NY 14202-3613

Address

716-854-6800 Fax: 716-854-3020

Telephone Number

June 15, 2012

Date

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

Signature of Debtor (Corporation/Partnership)

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

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

X /s/ Craig A. McClure

Signature of Authorized Individual

Craig A. McClure

Printed Name of Authorized Individual

President

Title of Authorized Individual

June 15, 2012

Date

Name of Debtor(s):

Signatures

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

Date

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 chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

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

Social-Security number (If the bankrutpcy 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.)

__

Date

Address

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

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

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

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

B4 (Official Form 4) (12/07)

United States Bankruptcy Court Western District of New York

In re	e McClure Dental Services, PC			
		Debtor(s)	Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
ADP	ADP	Prior payroll	anayeer to accept	900.00
One ADP Drive MS-100	One ADP Drive MS-100	service		
Augusta, GA 30909	Augusta, GA 30909			
Banco Dental Co.	Banco Dental Co.	Trade Debt		14,000.00
295 Centerpoint Blvd.	295 Centerpoint Blvd.			
Pittston, PA 18640-0491	Pittston, PA 18640-0491			
Equity Trust Co fbo Margaret	Equity Trust Co fbo Margaret O'Neill	Office equipment		71,319.27
O'Neill IRA 225 Burns Road	IRA 225 Burns Road	and receivables		(71,319.27
Elyria, OH 44035	Elyria, OH 44035			secured) (17,786.48 senior lien)
Internal Revenue Service	Internal Revenue Service	Assessment as	Disputed	460,012.89
Insolvency Unit	Insolvency Unit	Alter Ego of Craig		100,012.00
130 S. Elmwood Avenue	130 S. Elmwood Avenue	A. McClure		
Buffalo, NY 14202	Buffalo, NY 14202			
Internal Revenue Service	Internal Revenue Service	Payroll taxes for		75,000.00
Insolvency Unit	Insolvency Unit	3rd and 4th Q 2011,		
130 S. Elmwood Avenue	130 S. Elmwood Avenue	1st Q 2012		
Buffalo, NY 14202	Buffalo, NY 14202			
New Source Funding	New Source Funding	Office Equipment		60,000.00
2952 Seneca Street	2952 Seneca Street	and account		(60,000.00
Buffalo, NY 14224	Buffalo, NY 14224	receivables		secured)
				(89,105.75
NVO Book of Took of	NYO Date (Taretina de la Fi	D		senior lien)
NYS Dept of Taxation and	NYS Dept of Taxation and Finance	Payroll taxes for		30,000.00
Finance	Bankruptcy Section	3rd and 4th Q 2011,		
Bankruptcy Section PO Box 5300	PO Box 5300	1st Q 2012		
Albany, NY 12205-0300	Albany, NY 12205-0300			
RTG Dental Lab	RTG Dental Lab	Trade debt		27,500.00
120 Halstead Street	120 Halstead Street	Traue uebl		21,300.00
Rochester, NY 14610	Rochester, NY 14610			
Work Life	Work Life	Payroll for Week		36,000.00
6455 Shiloh Road	6455 Shiloh Road	ending June 15,		23,000.00
Suite A	Suite A	2012		
Alpharetta, GA 30005	Alpharetta, GA 30005			

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Best Case Bankruptcy

B4 (Official Form 4) (12/07) - Cont.						
In re	McClure Dental Services, PC	Case No.				
	Debtor(s)					

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(2)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Yellowstone Capital 160 Pearl Street 5th Floor New York, NY 10005	Yellowstone Capital 160 Pearl Street 5th Floor New York, NY 10005	Office Equipment and account receivables		25,000.00 (25,000.00 secured) (149,105.75 senior lien)
1	DECLADADION LINDED DENI	' 		

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

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date	June 15, 2012	Signature	/s/ Craig A. McClure	
			Craig A. McClure	
			President	

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.

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Best Case Bankruptcy

8488 Realty, LLC 88 West Utica Street Buffalo, NY 14209

ADP One ADP Drive MS-100 Augusta, GA 30909

Banco Dental Co. 295 Centerpoint Blvd. Pittston, PA 18640-0491

Equity Trust Co fbo John J O'Neill IRA 225 Burns Road Elyria, OH 44035

Equity Trust Co fbo Margaret O'Neill IRA 225 Burns Road Elyria, OH 44035

Internal Revenue Service Insolvency Unit 130 S. Elmwood Avenue Buffalo, NY 14202

Lynn Kavel 8950 Gowanda Street Eden, NY 14057

New Source Funding 2952 Seneca Street Buffalo, NY 14224

Niagara Mohawk 300 Erie Blvd. Syracuse, NY 13252

Nursing Home Service Contracts

NYS Dept of Taxation and Finance Bankruptcy Section PO Box 5300 Albany, NY 12205-0300 RTG Dental Lab 120 Halstead Street Rochester, NY 14610

Verizon PO Box 15124 Albany, NY 12212-5124

Verizon Wireless PO Box 408 Newark, NJ 07101-0408

Work Life 6455 Shiloh Road Suite A Alpharetta, GA 30005

Yellowstone Capital 160 Pearl Street 5th Floor New York, NY 10005

United States Bankruptcy Court Western District of New York

In re	McClure Dental Services, PC		Case No.	
		Debtor(s)	Chapter	11
	CORPORATE	OWNERSHIP STATEMENT	(RULE 7007.1)	
or recu follow	ant to Federal Rule of Bankruptcy Produsal, the undersigned counsel for Mcding is a (are) corporation(s), other than of any class of the corporation's(s') equals to the corporation of	Clure Dental Services, PC in the n the debtor or a governmental ur	above captioned nit, that directly	l action, certifies that the or indirectly own(s) 10% or
■ Nor	ne [Check if applicable]			
June	15, 2012	/s/ FREDERICK J. GAWRONSK	I	
Date	_	FREDERICK J. GAWRONSKI 27		
		Signature of Attorney or Litig	ant	
		Counsel for McClure Dental	Services, PC	
		COOK & GAWRONSKI, P.C. OLYMPIC TOWERS		
		300 PEARL STREET, STE. 335		
		BUFFALO, NY 14202-3613		
		716-854-6800 Fax:716-854-3020	J	