## B22B (Official Form 22B) (Chapter 11) (01/08)

(If known)

In re: McCoy, Paul A. & McCoy, Theresa A.

Case Number: \_

**CHAPTER 11 STATEMENT OF CURRENT MONTHLY INCOME** 

In addition to Schedules I and J, this statement must be completed by every individual chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. CALCULATION OF MONTHLY INCOME								
1	Marital/filing status. Check the box that a. Unmarried. Complete only Colut b. Married, not filing jointly. Complete C. Married, filing jointly. Complete Lines 2-10.	mn A ("Debto lete only Colu	or's Income imn A ("De	e") for Lines 2-1 btor's Income"	10. ') for Lines	2-10	0.		
the six calendar months prior to filing the bankruptcy case, ending on the last day of the <b>D</b>					column A Debtor's Income	S	olumn B Spouse's Income		
2	Gross wages, salary, tips, bonuses, ovo	ertime, commi	ssions.			\$	2,806.22	\$	2,255.46
	Net income from the operation of a but Line a and enter the difference in the app business, profession or farm, enter aggre Do not enter a number less than zero.	propriate colun	nn(s) of Lin	e 3. If more than	n one				
3	a. Gross receipts \$								
	b. Ordinary and necessary business e	expenses	\$						
	c. Business income		Subtract I Line a	line b from		\$		\$	
	Net rental and other real property inc difference in the appropriate column(s) of								
4	a. Gross receipts		\$						
4	b. Ordinary and necessary operating	expenses	\$						
	c. Rental income		Subtract I Line a	Line b from		\$		\$	
5	Interest, dividends, and royalties.					\$		\$	
6	Pension and retirement income. \$				\$				
7	Any amounts paid by another person expenses of the debtor or the debtor's that purpose. Do not include alimony o by the debtor's spouse if Column B is co	dependents, i r separate main	ncluding cl	nild support pai	id for	\$		\$	
8	<b>Unemployment compensation.</b> Enter the However, if you contend that unemployment was a benefit under the Social Security A Column A or B, but instead state the am	nent compensa Act, do not list	ation receive the amount	d by you or you	r spouse				
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$		Spouse \$		\$		\$	

# 2008 Jun 15 PM 11:26

CLERK U.S. BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO



# B22B (Official Form 22B) (Chapter 11) (01/08)

	(**** <b>*</b> *******************************						
9	sources on a separate page. Total maintenance payments paid by other payments of alimony or s received under the Social Security	Specify source and amount. If necessary, list ad and enter on Line 9. <b>Do not include alimony</b> <b>your spouse if Column B is completed, but i</b> <b>eparate maintenance.</b> Do not include any ben y Act or payments received as a victim of a wa ctim of international or domestic terrorism. \$ \$	or separate include all efits				
	0.	Ψ		\$		\$	
10 <b>Subtotal of current monthly income.</b> Add Lines 2 thru 9 in Column A, and, if Column B i completed, add Lines 2 through 9 in Column B. Enter the total(s).			Column B is	\$	2,806.22	\$	2,255.46
11					5,061.68		
		Part II. VERIFICATION					
	I declare under penalty of perjury both debtors must sign.)	that the information provided in this statement	t is true and con	rrect.	(If this a jo	oint d	case,
12	Date: June 15, 2008	Signature: /s/ Paul A. McCoy	(Debtor)				
	Date: June 15, 2008	Signature: /s/ Theresa A. McCoy	oint Debtor, if any)				

#### B1 (Official Form 1) (1/08)

United States Bankruptcy Court Northern District of Ohio				Volu	intary Petition	
Name of Debtor (if individual, enter Last, First, Mide McCoy, Paul A.	Name of Joint Debtor (Spouse) (Last, First, Middle): McCoy, Theresa A.					
All Other Names used by the Debtor in the last 8 year (include married, maiden, and trade names): dba McCoy's Excavating & Welding	rs	(include married,	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): dba McCoy's Excavating & Welding			
Last four digits of Soc. Sec. or Individual-Taxpayer I. EIN (if more than one, state all): <b>5216</b>	D. (ITIN) No./Complete		Soc. Sec. or Individual-7 one, state all): <b>7148</b>	Taxpayer I.D	D. (ITIN) No./Complete	
Street Address of Debtor (No. & Street, City, State & 11500 State Route 170	Zip Code):	11500 State F	Joint Debtor (No. & Stre Coute 170	et, City, Sta	te & Zip Code):	
Negley, OH	ZIPCODE <b>44441</b>	Negley, OH		2	ZIPCODE <b>44441</b>	
County of Residence or of the Principal Place of Busic Columbiana	iness:	County of Resider	nce or of the Principal Pla	ice of Busin	ess:	
Mailing Address of Debtor (if different from street ad	ldress)	Mailing Address of	of Joint Debtor (if differe	nt from stree	et address):	
	ZIPCODE			Z	ZIPCODE	
Location of Principal Assets of Business Debtor (if d	ifferent from street address	above):		·		
11500 State Route 170, Negley, OH				Z	ZIPCODE <b>44441</b>	
Type of Debtor         (Form of Organization)         (Check one box.)         ✓ Individual (includes Joint Debtors)         See Exhibit D on page 2 of this form.         Corporation (includes LLC and LLP)         Partnership         Other (If debtor is not one of the above entities, check this box and state type of entity below.)         Filing Fee (Check one box         ✓ Full Filing Fee attached	Nature of (Check o Health Care Business Single Asset Real Es U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Ø Other Tax-Exen (Check box, i Debtor is a tax-exem Title 26 of the United Internal Revenue Coo	ne box.) iate as defined in 11 pt Entity f applicable.) pt organization under States Code (the le). Check one box:	the Petitic           □ Chapter 7           □ Chapter 9           ☑ Chapter 11           □ Chapter 12           □ Chapter 13	n is Filed ( Chap Reco Main Chap Reco Nonr Nature of I (Check one ly consumer 1 U.S.C. red by an ly for a or house- Debtors	box.) ✓ Debts are primarily business debts.	
<ul> <li>Filing Fee to be paid in installments (Applicable to attach signed application for the court's considerat is unable to pay fee except in installments. Rule 10 3A.</li> <li>Filing Fee waiver requested (Applicable to chapter attach signed application for the court's considerat</li> </ul>	☐ Debtor is not a Check if: ☑ Debtor's aggreg affiliates are les Check all applica ☑ A plan is being	small business debtor as gate noncontingent liquid is than \$2,190,000. <b>ble boxes:</b> filed with this petition	defined in 1 ated debts o	1 U.S.C. § 101(51D). wed to non-insiders or		
Acceptances of the plan were solicited prepetition from one or more classes creditors, in accordance with 11 U.S.C. § 1126(b).						
Statistical/Administrative Information         ✓ Debtor estimates that funds will be available for of         □ Debtor estimates that, after any exempt property indistribution to unsecured creditors.			e will be no funds availab	le for	THIS SPACE IS FOR COURT USE ONLY	
Estimated Number of Creditors           Image: Strength of the strengt of the strength of the strength of the strength of the str		0,001- 25,00 25,000 50,00		Over 100,000		
Estimated Assets           Stress         Image: Constraint of the sector of t			000,001 \$500,000,001 0 million to \$1 billion	More than \$1 billion		
Estimated Liabilities  Estimated Liabilities  \$     0			000,001 \$500,000,001 0 million to \$1 billion	☐ More than \$1 billion		

B1 (Off	icial Form 1) (1/08)		Page 2
	tary Petition age must be completed and filed in every case)	Name of Debtor(s): McCoy, Paul A. & McCoy, Tl	heresa A.
	Prior Bankruptcy Case Filed Within Last 8	<b>3 Years</b> (If more than two, attach	additional sheet)
Locatio Where	on Filed: <b>None</b>	Case Number:	Date Filed:
Locatio Where		Case Number:	Date Filed:
Per	nding Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)
Name of <b>None</b>	of Debtor:	Case Number:	Date Filed:
District	:	Relationship:	Judge:
Exhibit A       Exhibit B         (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.)       I, the attorney for the petitioner named in the foregoing petition, that I have informed the petitioner that [he or she] may procee chapter 7, 11, 12, or 13 of title 11, United States Code, ar explained the relief available under each such chapter. I further that I delivered to the debtor the notice required by § 342(b) Bankruptcy Code.         X       Signature of Attorney for Debtor(s)			
or safet	ne debtor own or have possession of any property that poses or is a y? s, and Exhibit C is attached and made a part of this petition.		t and identifiable harm to public health
	<b>Exhi</b> completed by every individual debtor. If a joint petition is filed, ea Exhibit D completed and signed by the debtor is attached and ma	ach spouse must complete and atta-	ch a separate Exhibit D.)
	s a joint petition: Exhibit D also completed and signed by the joint debtor is attached	ed a made a part of this petition.	
	<b>Information Regardin</b> (Check any ap Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 There is a bankruptcy case concerning debtor's affiliate, general p Debtor is a debtor in a foreign proceeding and has its principal place or has no principal place of business or assets in the United States b in this District, or the interests of the parties will be served in rega	pplicable box.) of business, or principal assets in th ) days than in any other District. partner, or partnership pending in t ace of business or principal assets but is a defendant in an action or pro-	this District. in the United States in this District, oceeding [in a federal or state court]
	<b>Certification by a Debtor Who Reside</b> (Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.)	
	(Name of landlord or lesso	or that obtained judgment)	
	(Address of lan	idlord or lessor)	
	Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for poss		
	Debtor has included in this petition the deposit with the court of a filing of the petition.	any rent that would become due du	ring the 30-day period after the

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)	McCoy, Paul A. & McCoy, Theresa A.
Signa	atures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
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 State 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/ Paul A. McCoy	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 <b>one</b> 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 Debtor Paul A. McCoy	
X /s/ Theresa A. McCoy Signature of Joint Debtor Theresa A. McCoy	Printed Name of Foreign Representative
	Date
Telephone Number (If not represented by attorney)	
June 15, 2008	
Signature of Attorney*	
X /s/ Peter Horvath Signature of Attorney for Debtor(s) Peter Horvath 0016306 Printed Name of Attorney for Debtor(s) Peter Horvath Firm Name 38294 Industrial Park Address Lisbon, OH 44432 (330) 420-0019 Telephone Number June 15, 2008 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	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); 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 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.)
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	X Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. Date 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:
Signature of Authorized Individual	
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions</i>
Title of Authorized Individual	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.
Date	

IN RE:

Case No.
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McCoy, Paul A.

Chapter 11

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

Debtor(s)

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

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

□ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.* 

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature	of Debtor:	/s/ Paul A.	McCov	,
Signature	01 2 000011			_

Date: June 15, 2008

IN RE:

Case No.

McCoy, Theresa A.

Chapter 11

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

Debtor(s)

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

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

□ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.* 

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Date: June 15, 2008

#### IN RE:

Case No.

McCoy, Paul A. & McCoy, Theresa A.

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).

(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.)	<ul> <li>(4)</li> <li>Indicate if claim</li> <li>is contingent,</li> <li>unliquidated,</li> <li>disputed or</li> <li>subject to setoff</li> </ul>	(5) Amount of claim (if secured also state value of security)
Caterpiller Financial Services Corp. 2120 West End Avenue P.O. Box 34001 Nashville, TN 37203		Bank loan		88,500.00 Collateral: 75,000.00 Unsecured: 88,500.00
Lafarge North America Construction Materials P.O. Box 70661 Chicago, IL 60673		Trade debt		25,565.00
Citi Capital P.O. Box 6229 Carol Stream, IL 60197		Bank Ioan		102,564.00 Collateral: 90,000.00 Unsecured: 12,564.00
Caterpiller Financial Services Corp. 2120 West End Avenue P.O. Box 34001 Nashville, TN 37203		Bank Ioan		72,500.00 Collateral: 60,000.00 Unsecured: 12,500.00
Citi Capital P.O. Box 6229 Carol Stream, IL 60197		Bank Ioan		66,356.00 Collateral: 56,000.00 Unsecured: 10,356.00
Citiffinancial 1111 Northpoint Drive Suite 100 Coppell, TX 75019		Bank loan		10,000.00
First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308		Bank Ioan		38,000.00 Collateral: 30,000.00 Unsecured: 8,000.00
Discover Card P.O. Box 15251 Wilmington, DE 19850-5192		Trade debt		7,000.00
First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308		Bank loan		34,000.00 Collateral: 28,000.00 Unsecured: 6,000.00

Chase Cardmember Service	Trade debt	5,000.00
P.O. Box 15153		
Wilmington, DE 19886		
Dillards	Trade debt	4,000.00
P.O. Box 52005		
Phoenix, AZ 85072		
First Merit Bank	Bank loan	12,000.00
111 Cascade Plaza CAS30		Collateral:
Akron, OH 44308		8,000.00
		Unsecured:
		4,000.00
Quaker City Septic Tank Main Street Leetonia, OH 44431	Trade debt	3,000.00
Sears Credit Card	Trade debt	2,000.00
P.O. Box 183082		_,
Columbus, OH 43218		
American Honda Finance Corp.	Bank loan	4,324.00
P.O. Box 105027		Collateral:
Atlanta, GA 30348		3,000.00
		Unsecured:
		1,324.00
American Honda Finance Corp.	Bank loan	4,000.00
P.O. Box 105027		Collateral:
Atlanta, GA 30348		3,000.00
		Unsecured:
		1,000.00

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I 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, 2008	Signature /s/ Paul A. McCoy	
	of Debtor	Paul A. McCoy
Date: June 15, 2008	Signature /s/ Theresa A. McCoy	
	of Joint Debtor (if any)	Theresa A. McCoy

# IN RE:

Case No.

McCoy, Paul A. & McCoy, Theresa A.

Chapter 11

# SUMMARY OF SCHEDULES

Debtor(s)

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 also must 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)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 270,000.00		
B - Personal Property	Yes	3	\$ 389,000.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	3		\$ 706,244.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 56,565.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 19,561.68
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 16,869.00
	TOTAL	15	\$ 659,000.00	\$ 762,809.00	

IN	RE:
----	-----

Case No. \_\_\_\_\_

# McCoy, Paul A. & McCoy, Theresa A.

Debtor(s)

Chapter 11

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

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

 $\mathbf{V}$  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:

\$
\$
\$

# 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)	\$

Case No.

(If known)

Debtor(s)

# **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, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
11500 State Route 170, Negley, Ohio, debtors' residence	JTWROS	J	150,000.00	131,000.00
11534 State Route 170, Negley, Ohio, second home	Fee Simple	J	120,000.00	118,000.00
		TAT	270 000 00	

Case No.

(If known)

Debtor(s)

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.

**SCHEDULE B - PERSONAL PROPERTY** 

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

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	X			
2.	Checking, savings or other financial 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.	X			
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.	X			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Clothing		0.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			

# IN RE McCoy, Paul A. & McCoy, Theresa A. Debtor(s)

\_\_\_\_\_ Case No. \_\_\_\_\_

(If known)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.	x			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	x			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and		2003 GMC 1500	J	4,000.00
	other vehicles and accessories.		2003 Trailboss trailer	J	8,000.00
			2004 Cat 312 excavator	J	60,000.00
			2005 Cat D5 buildozer	J	75,000.00
			2005 International 5500 Dump 2005 Komatsu RC50 excavator	J	56,000.00 27,000.00
			2005 Komatsu RC50 excavator 2007 Dodge 2500	Н	27,000.00
			2007 Dodge 3500	н	30,000.00
			2007 International 9900IX	J	95,000.00
			4-wheeler	J	3,000.00
			4-wheeler	J	3,000.00
26.	Boats, motors, and accessories.	X			

Case No.

(If known)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Debtor(s)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
27.	Aircraft and accessories.	Х			
	Office equipment, furnishings, and supplies.	X			
	Machinery, fixtures, equipment, and supplies used in business.	X			
	Inventory.	X			
	Animals.	X			
	Crops - growing or harvested. Give particulars.	X			
	Farming equipment and implements.	X			
	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

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TOTAL

389,000.00

Debtor(s)

Case No. \_\_\_\_\_

(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

sheek one boxy	
☐ 11 U.S.C. § 522(b)(2) ✓ 11 U.S.C. § 522(b)(3)	
✓11 U.S.C. § 522(b)(3)	

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY 11500 State Route 170, Negley, Ohio, debtors' residence	R.C. §§ 1721.10, 517.09, 2329.66(A)(8)	19,000.00	150,000.00

Debtor(s)

# 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 Liabilities and Related Data.

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.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	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. <b>1125</b>		w	4-wheeler				4,324.00	1,324.00
American Honda Finance Corp. P.O. Box 105027 Atlanta, GA 30348			VALUE \$ 3,000.00					
ACCOUNT NO. <b>5337</b>		н	4-wheeler				4,000.00	1,000.00
American Honda Finance Corp. P.O. Box 105027 Atlanta, GA 30348			VALUE \$ 3,000.00					
ACCOUNT NO. <b>11212839</b>	$\top$	w	2005 Cat D5 Dozer	┢	┢		88,500.00	88,500.00
Caterpiller Financial Services Corp. 2120 West End Avenue P.O. Box 34001 Nashville, TN 37203			VALUE \$ <b>75,000.00</b>					
ACCOUNT NO. <b>11325295</b>		w	2004 Cat 312 Excavator	┢	┢		72,500.00	12,500.00
Caterpiller Financial Services Corp. 2120 West End Avenue P.O. Box 34001 Nashville, TN 37203			VALUE \$ 60,000.00					
<b>2</b> continuation sheets attached					otot		s 169,324.00	§ 103,324.00
continuation sneets attached			(Total of the second se	,	Tot	al	\$ 103,324.00 \$ (Report also on Summary of Schedules.)	\$ 103,324.00 \$ (If applicable, report also on Statistical Summary of Certain

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(If known)

Case No.

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

Case No.

#### (If known)

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor(s)

# (Continuation Sheet)

			(			_		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	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. <b>15865249</b>		w	2005 International 5500 Dump				66,356.00	10,356.00
Citi Capital P.O. Box 6229 Carol Stream, IL 60197								
			VALUE \$ 56,000.00					
ACCOUNT NO. 16027527		w	secured with 2007 International 9900IX				102,564.00	12,564.00
Citi Capital P.O. Box 6229 Carol Stream, IL 60197								
			VALUE \$ 90,000.00					
ACCOUNT NO. 000003265651		н	2/07 Paul's 2007 Dodge 3500				38,000.00	8,000.00
First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308								
			VALUE \$ 30,000.00					
ACCOUNT NO. 000003241875		н	son's Dodge 2500				34,000.00	6,000.00
First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308								
			VALUE \$ 28,000.00					
ACCOUNT NO.		J	trailer				12,000.00	4,000.00
First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308								
			VALUE \$ 8,000.00					
ACCOUNT NO. <b>488905009200</b>		н	wife's 2003 GMC 1500				8,000.00	
GMAC P.O. Box 3100 Midland, TX 79702								
			VALUE \$ 8,000.00					
Sheet no. <u>1</u> of <u>2</u> continuation sheets atta Schedule of Creditors Holding Secured Claims	ched	to	(Total of		pag	e)	\$  260,920.00	\$ 40,920.00
			(Use only on		Tot pag		\$	\$

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

(Report also on Summary of Schedules.)

Case No.

#### (If known)

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor(s)

			(Continuation Sheet)					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	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.			Assignee or other notification for:					
GMAC Payment Processing P.O. Box 9001951 Louisville, KY 40290			GMAC					
			VALUE \$					
ACCOUNT NO. Huntington Banks 2361 Morse Road Columbus, OH 43216		J	first mortgage				107,000.00	
			VALUE \$ 150,000.00					
ACCOUNT NO.		J	home equity loan				24,000.00	
Huntington Banks 2361 Morse Road Columbus, OH 43216								
			VALUE \$ 24,000.00					
ACCOUNT NO.		J	first mortgage on second home				118,000.00	
Huntington Banks 2361 Morse Road Columbus, OH 43216								
			VALUE \$ 120,000.00					
ACCOUNT NO. 1944011		w	2005 Komatsu RC50 Excavator				27,000.00	
Komatsu Financial P.O. Box 99303 Chicago, IL 60693								
			VALUE \$ 27,000.00					
ACCOUNT NO.								
			VALUE \$					
Sheet no. 2 of 2 continuation sheets atta	ched	to	······································	Sul		 a1		

Schedule of Creditors Holding Secured Claims

(Total of this page)

Total (Use only on last page)

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

\$

144,244.00

706,244.00

(Report also on Summary of Schedules.)

\$

Debtor(s)

# 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 "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Longent." If the claim is disputed, place an "X" in the column labeled "Longent." 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).

#### 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).

#### 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).

#### **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.

**0** continuation sheets attached

(If known)

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#### IN RE McCoy, Paul A. & McCoy, Theresa A.

Debtor(s)

Case No. \_\_\_\_

#### (If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

Report 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 nonpriority claims to report on this Schedule F.

		NT,					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4417-1229-5714-1808		J	credit card				
Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886							5,000.00
ACCOUNT NO.		J	account				
Citiffinancial 1111 Northpoint Drive Suite 100 Coppell, TX 75019							10,000.00
ACCOUNT NO. 374354010315818		J	merchandise				
Dillards P.O. Box 52005 Phoenix, AZ 85072							4,000.00
ACCOUNT NO. 6011-0055-2300-4417		J	credit card				
Discover Card P.O. Box 15251 Wilmington, DE 19850-5192							
							7,000.00
1 continuation sheets attached			(Total of th	Sub is p			\$ 26,000.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Related	als atis	tica	n al	\$

\_\_\_\_\_ Case No. \_\_\_\_\_

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Debtor(s)

						_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3788703		J	supplies	$\square$		Π	
Lafarge North America Construction Materials P.O. Box 70661 Chicago, IL 60673							25,565.00
ACCOUNT NO.		J	supplies			Π	
Quaker City Septic Tank Main Street Leetonia, OH 44431							3,000.00
ACCOUNT NO. <b>512107185462</b>		J	merchandise	$\vdash$	$\mid \mid$	$\vdash$	3,000.00
Sears Credit Card P.O. Box 183082 Columbus, OH 43218							2,000.00
ACCOUNT NO.							,
ACCOUNT NO.	-						
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no1 of1 continuation sheets attached to			<u> </u>	Sub	tot		
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St	is p T als tatis	age Fota o o stica	e) al n al	\$    30,565.00
			Summary of Certain Liabilities and Relate	d D	ata.	.)	\$ 56,565.00

Debtor(s)

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).

 $\checkmark$  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.

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

#### IN RE McCoy, Paul A. & McCoy, Theresa A.

Debtor(s)

Case No. \_

(If known)

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

#### $\checkmark$ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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 From 22A, 22B, or 22C.

Debtor's Marital Status	DEPEN	DENTS OF DEBTOR ANI	O SPOUSE	3		
Married	RELATIONSHIP(S):				AGE(S):	
EMPLOYMENT:	DEBTOR			SPOUSE		
Occupation	s Contracting	Medical Care Renal Care Gro 2 years 784 Melrose Av Nashville, TN 3	up e.			
	or projected monthly income at time cas salary, and commissions (prorate if not p		\$ \$	DEBTOR 2,806.22	\$ \$	SPOUSE 2,255.46
<ul> <li><b>3. SUBTOTAL</b></li> <li>4. LESS PAYROLL DEDUCTION</li> <li>a. Payroll taxes and Social Sectors</li> <li>b. Insurance</li> <li>c. Union dues</li> <li>d. Other (specify)</li> </ul>			\$ \$ \$ \$ \$	2,806.22	\$ \$ \$ \$ \$	2,255.46
5. SUBTOTAL OF PAYROLL 6. TOTAL NET MONTHLY T			\$\$	0.00		0.00 2,255.46
<ol> <li>Regular income from operation</li> <li>Income from real property</li> <li>Interest and dividends</li> <li>Alimony, maintenance or sup that of dependents listed above</li> <li>Social Security or other government</li> </ol>	n of business or profession or farm (attac port payments payable to the debtor for		\$\$ \$\$ \$\$	14,500.00		
<ul><li>12. Pension or retirement income</li><li>13. Other monthly income</li><li>(Specify)</li></ul>			\$ \$ \$ \$		\$ \$ \$ \$	
14. SUBTOTAL OF LINES 7 1 15. AVERAGE MONTHLY IN	<b>THROUGH 13</b> <b>COME</b> (Add amounts shown on lines 6	5 and 14)	\$ \$	14,500.00 17,306.22		2,255.46
<b>16. COMBINED AVERAGE</b> M if there is only one debtor repeat	<b>IONTHLY INCOME</b> : (Combine colur total reported on line 15)	nn totals from line 15;		\$	19,561.6	8

(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: **None** 

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

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## IN RE McCoy, Paul A. & McCoy, Theresa A.

Debtor(s)

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

Case No.

(If known)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, 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 Form22A 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)	\$2,243.00
a. Are real estate taxes included? Yes 🖌 No	
b. Is property insurance included? Yes 🖌 No	
2. Utilities:	¢
a. Electricity and heating fuel	\$ <b>300.00</b>
b. Water and sewer	۵ <u>۵</u>
c. Telephone	\$200.00
d. Other	\$
2 Home maintenance (remains and values)	\$
3. Home maintenance (repairs and upkeep)	\$ <u>100.00</u>
4. Food	\$ 300.00
5. Clothing	\$ <b>100.00</b>
6. Laundry and dry cleaning	\$
7. Medical and dental expenses	\$ 100.00
8. Transportation (not including car payments)	\$ 400.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$200.00
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	¢
a. Homeowner's or renter's	\$
b. Life	\$ <u>125.00</u>
c. Health	\$
d. Auto	\$
e. Other	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	ψ
(Specify) Sales Tax	\$ 2,500.00
lfta Tax	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$
b. Other	\$
	\$
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ 10,301.00
17. Other	\$
	\$
	\$
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.	\$16,869.00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None** 

# 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	nly income from Line 15 of Schedule I
--	---------------------------------------

b. Average monthly expenses from Line 18 above

\$ 19,561.68 \$ 16,869.00 \$ 2,692.68

c. Monthly net income (a. minus b.)

Debtor(s)

Case No.

(If known)

Social Security No. (Required by 11 U.S.C. § 110.)

# 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 **17** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: June 15, 2008	Signature: /s/ Paul A. McCoy	
	Paul A. McCoy	Debtor
Date: June 15, 2008	Signature: /s/ Theresa A. McCoy	
	Theresa A. McCoy	(Joint Debtor, if any)
	Therefore a modely	[If joint case, both spouses must sign.]

#### 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(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 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 the document.

Address

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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 provision 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 CORPORATION OR PARTNERSHIP

I, the \_\_\_\_

\_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a

Date

member or an authorized agent of the partnership) of the

(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 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: Signature:

(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.

IN RE:		Case No.	
McCoy, Paul A. & McCoy, Theresa A.		Chapter 11	
	Debtor(s)		
	<b>BUSINESS INCOME AND EXPE</b>	ENSES	
FINANCIAL REVIEW OF THE DEP	BTOR'S BUSINESS (Note: ONLY INCL	LUDE information directly re	elated to the business
operation.)	``		
PART A - GROSS BUSINESS INCOM	E FOR THE PREVIOUS 12 MONTHS:		
1. Gross Income For 12 Months Prior	to Filing:	\$	
PART B - ESTIMATED AVERAGE FU	TURE <u>GROSS</u> MONTHLY INCOME:		
2. Gross Monthly Income:			\$14,500.00
PART C - ESTIMATED FUTURE MON	VTHLY EXPENSES:		
<ol> <li>Net Employee Payroll (Other Than</li> <li>Payroll Taxes</li> <li>Unemployment Taxes</li> <li>Worker's Compensation</li> <li>Other Taxes</li> <li>Inventory Purchases (Including raw</li> <li>Purchase of Feed/Fertilizer/Seed/Sp</li> <li>Rent (Other than debtor's principal</li> <li>Utilities</li> <li>Office Expenses and Supplies</li> <li>Repairs and Maintenance</li> <li>Vehicle Expenses</li> <li>Travel and Entertainment</li> <li>Equipment Rental and Leases</li> <li>Legal/Accounting/Other Profession</li> <li>Insurance</li> <li>Employee Benefits (e.g., pension, n</li> <li>Payments to be Made Directly by D Business Debts (Specify):</li> </ol>	v materials) pray residence) nal Fees	\$	
21. Other (Specify): Ed Wilson Trucking Pipelines	700.00 3,000.00	\$3,700.00	)
22. Total Monthly Expenses (Add item	is 3-21)		\$10,301.00
PART D - ESTIMATED AVERAGE NE	ET MONTHLY INCOME		
23. AVERAGE NET MONTHLY IN	COME (Subtract Item 22 from Item 2)		\$4,199.00

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#### IN RE:

Case No.

McCoy, Paul A. & McCoy, Theresa A.

Chapter 11

Debtor(s)

# STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

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

#### DEFINITIONS

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

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

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

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 joint income from debtors' wages in 2007: \$19,561 additional income from business: approx \$180,000 annual income

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

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

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

None *a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Huntington Banks 2361 Morse Road DATES OF PAYMENTS

AMOUNT	AMOUNT
PAID	STILL OWING
910.00	107,000.00

	mbus, OH 43216			
2361	ington Banks Morse Road		354.00	24,000.00
Hunt 2361	mbus, OH 43216 ington Banks Morse Road mbus, OH 43216	through 5/08	989.00	118,000.00
None	b. Debtor whose debts are not primarily consumer d preceding the commencement of the case unless the \$5,475. If the debtor is an individual, indicate with a obligation or as part of an alternative repayment sched debtors filing under chapter 12 or chapter 13 must im is filed, unless the spouses are separated and a joint p	aggregate value of all property that constitute n asterisk (*) any payments that were made to ule under a plan by an approved nonprofit budg clude payments and other transfers by either o	es or is affected by such tran a creditor on account of a d geting and credit counseling a	asfer is less than omestic support gency. (Married
None	<i>c. All debtors:</i> List all payments made within <b>one ye</b> who are or were insiders. (Married debtors filing und a joint petition is filed, unless the spouses are separate	er chapter 12 or chapter 13 must include paym		
4. Su	its and administrative proceedings, executions, gar	nishments and attachments		
None	a. List all suits and administrative proceedings to wh bankruptcy case. (Married debtors filing under chapt not a joint petition is filed, unless the spouses are sep	er 12 or chapter 13 must include information of		
None	b. Describe all property that has been attached, garning the commencement of this case. (Married debtors fill or both spouses whether or not a joint petition is file	ing under chapter 12 or chapter 13 must inclu	de information concerning p	
5. Re	possessions, foreclosures and returns			
None	List all property that has been repossessed by a credit the seller, within <b>one year</b> immediately preceding th include information concerning property of either or joint petition is not filed.)	e commencement of this case. (Married debto	rs filing under chapter 12 or	chapter 13 must
6. As	signments and receiverships			
None	a. Describe any assignment of property for the benefit (Married debtors filing under chapter 12 or chapter 13 unless the spouses are separated and joint petition is	must include any assignment by either or both	ly preceding the commencen spouses whether or not a joint	nent of this case. petition is filed,
None	b. List all property which has been in the hands of a commencement of this case. (Married debtors filing us spouses whether or not a joint petition is filed, unless	nder chapter 12 or chapter 13 must include info	rmation concerning property	
7. Gi	fts			
None	List all gifts or charitable contributions made within gifts to family members aggregating less than \$200 in per recipient. (Married debtors filing under chapter 1) a joint petition is filed, unless the spouses are separate	value per individual family member and charit 2 or chapter 13 must include gifts or contribut	able contributions aggregatin	g less than \$100
8. Lo	sses			
None	List all losses from fire, theft, other casualty or game commencement of this case. (Married debtors filing a joint petition is filed, unless the spouses are separate	under chapter 12 or chapter 13 must include lo		

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

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Peter Horvath 38294 Industrial Park DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR **5/08**  AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 2,500.00

#### 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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

#### 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

<sup>None</sup> List all property owned by another person that the debtor holds or controls.

#### 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Ivana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### **17. Environmental Information**

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

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

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

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

None

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

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

 $\checkmark$ 

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

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

None

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

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

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

	LAST FOUR DIGITS OF SOCIAL- SECURITY OR OTHER INDIVIDUAL			
	TAXPAYER-I.D. NO.		NATURE OF	<b>BEGINNING AND</b>
NAME	(ITIN)/COMPLETE EIN	ADDRESS	BUSINESS	ENDING DATES
McCoy's Excavating & Welding		11500 SR 170 Negley, OH  44441	heavy equipment	the business is active

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

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

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

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

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

NAME AND ADDRESS Theresa McCoy 11500 State Route 170 Negley, OH	DATES SERVICES RENDERED current
Denny Fricano 5th Avenue East Liverpool, OH 43920	current, working on 2006 and 2007 taxes
None b. List all firms or individuals who we and records, or prepared a financial $\checkmark$	ithin the <b>two years</b> immediately preceding the filing of this bankruptcy case have audited the books of account statement of the debtor.
	at the time of the commencement of this case were in possession of the books of account and records of the nt and records are not available, explain.
NAME AND ADDRESS	

Theresa McCoy **Denny Fricano** 5th Avenue East Liverpool, OH 43920

None	d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the <b>two years</b> immediately preceding the commencement of the case by the debtor.				
20. Ir	iventories				
None	a List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the				
None	b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.				
21. C	urrent Partners, Officers, Directors and Shareholders				
None	a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.				
None	b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.				
22. F	ormer partners, officers, directors and shareholders				
None	a. If the debtor is a partnership, list each member who withdrew from the partnership within <b>one year</b> immediately preceding the commencement of this case.				
None	b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within <b>one year</b> immediately preceding the commencement of this case.				
23. W	/ithdrawals from a partnership or distributions by a corporation				
None	If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during <b>one year</b> immediately preceding the commencement of this case.				
24. T	ax Consolidation Group				
None	If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within <b>six years</b> immediately preceding the commencement of the case.				
25. P	ension Funds.				
None	If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within <b>six years</b> immediately preceding the commencement of the case.				
[If co	ompleted by an individual or individual and spouse]				

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

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Date: June 15, 2008	Signature /s/ Paul A. McCoy	
	of Debtor	Paul A. McCoy
Date: June 15, 2008	Signature /s/ Theresa A. McCoy	
	of Joint Debtor	Theresa A. McCoy
	(if any)	
	0 continuation pages attached	

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

Case No.

 McCoy, Paul A. & McCoy, Theresa A.
 Chapter 11

 Debtor(s)
 VERIFICATION OF CREDITOR MATRIX

 The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

 Date:
 June 15, 2008

 Signature:
 /s/ Paul A. McCoy

 Paul A. McCoy
 Debtor

 Date:
 June 15, 2008

 Signature:
 /s/ Theresa A. McCoy

 Joint Debtor, if any

IN RE:

American Honda Finance Corp. P.O. Box 105027 Atlanta, GA 30348

Caterpiller Financial Services Corp. 2120 West End Avenue P.O. Box 34001 Nashville, TN 37203

Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886

Citi Capital P.O. Box 6229 Carol Stream, IL 60197

Citiffinancial 1111 Northpoint Drive Suite 100 Coppell, TX 75019

Dillards P.O. Box 52005 Phoenix, AZ 85072

Discover Card P.O. Box 15251 Wilmington, DE 19850-5192

First Merit Bank 111 Cascade Plaza CAS30 Akron, OH 44308 GMAC P.O. Box 3100 Midland, TX 79702

GMAC Payment Processing P.O. Box 9001951 Louisville, KY 40290

Huntington Banks 2361 Morse Road Columbus, OH 43216

Komatsu Financial P.O. Box 99303 Chicago, IL 60693

Lafarge North America Construction Materials P.O. Box 70661 Chicago, IL 60673

Quaker City Septic Tank Main Street Leetonia, OH 44431

Sears Credit Card P.O. Box 183082 Columbus, OH 43218

## United States Bankruptcy Court Northern District of Ohio

IN	RE:	Case No.	
Mo	Coy, Paul A. & McCoy, Theresa A.	Chapter <u>11</u>	
	Debtor(s)		
	<b>DISCLOSURE OF COMPENSATION O</b>	F ATTORNEY FOR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the att one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for s of or in connection with the bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	2,000.00
	Prior to the filing of this statement I have received	\$	2,500.00
	Balance Due	\$	-500.00
2.	The source of the compensation paid to me was: $\mathbf{\overrightarrow{V}}$ Debtor $\Box$ Other (specify):		
3.	The source of compensation to be paid to me is: $\mathbf{\overrightarrow{D}}$ Debtor $\Box$ Other (specify):		
4.	I have not agreed to share the above-disclosed compensation with any other person	unless they are members and associates of my law firm.	
	I have agreed to share the above-disclosed compensation with a person or persons together with a list of the names of the people sharing in the compensation, is attact		y of the agreement,
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects	of the bankruptcy case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in debtor in and filing of any petition, schedules, statement of affairs and plan whice.</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, a Representation of the debtor in adversary proceedings and other contested bankrup e. [Other provisions as needed]</li> <li>\$1,700.00 of the total fee will be paid through the repayment plan</li> </ul>	ch may be required; and any adjourned hearings thereof; tey matters;	

6. By agreement with the debtor(s), the above disclosed fee does not include the following services: Adversary actions, complaint to avoid subordinate unsecured liens

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bank	cruptcy
proceeding.	

June 15, 2008 Date /s/ Peter Horvath

Signature of Attorney

Peter Horvath

Name of Law Firm

## ALEX E. PARIS CONTRACTING COMPANY, INC.

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EARNINGS		IE SO CURRENT AMOUNT	CIAL SECURITY NO. YEAR TO DATE	PENICO SEC. PENICO DEDUCTIONS	DEMO <sup>RS</sup> CHECKNO IN CURRENT AMOUNT	<sub>o.</sub> 735
re hormal Pre Jormal	40.00 5.50	891,21 101,55	2962, At. 228, 27	URION NUES WI APPENDINGENE		
			in the state of th	REFERENCES	- 1111-1115-1155 - 1111-111-111-111-111-111-111-111-111-	
NG PORMAL	원(11))))	网络人名印第马马尔 第二十二章	であまれ。 11月1日 - 11月1日 11月1日 - 11月1日	UNION PEDS PED VIEWEGLD	<ul> <li>(二合む)</li> <l< td=""><td></td></l<></ul>	
	C., 30	101 58	93.0856	SOCL SET.	의 가 있다. 김정 (영주	
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				$ \begin{array}{c} \sum_{i=1}^{N-1} \frac{1}{2} \sum_{i=1}^{N-1} \left[ \sum_{i=1}^{N-1} \sum_{i=1}^{N-$	9.52 8.	
				INIPLATION	(), 6.C	
PAY RATE (	QSB, 77 CURRENT EARNINGS (	207.)5 CURRENT DEDUCTIONS	))( NET PAY	61 3,223.28 YTD. EARNINGS	Y.T.D. DEDUCTIONS	2,489.05 Y.T.D. NET PAY
ALEX E. PARIS :	CONTRACTING LON	IPANY, INC.		neer hour and have here the financial have have and they have have here in	an ban yan ban kan ana ana ban bana ka ka ka ana kan ban ana ban ana ban ang ban ban ang ban ban ban ban ban ba	
.91 MCCO	Y PAUL A	26	9-76-5216 AL SECURITY NO.	04/14/08 04/20	0/08 074658 NO	7-650
EARNINGS	EMPLOYEE NAME HRS/UNITS	Usterant Amerikan	an Selation (1997) Astronomicae	PERIOD BEG. PERIOD I DEDUCTIONS		An
G NORMAL	40.00	801.21	3603.22	UNION DUES WI	14.60	39.15
'T NORMAL 3L NORMAL	36.50 7.00	1041.61 263.20	1452.88 263.20	APPRENTICESHI HOURLY DUES	8.35 1.67	23.95 4.79
IIMBURSABLE		9.00	9.00	UNION DEDS	0.00	15.71
RNINGS	HOURS	CUR AMT	RATE	FED WITHHOLD SOC. SEC.	303.67 130.57	529.90 330.41
IG NORMAL	40.00	801.21	20.0300	MEDICARE	30.54	77.28
'T NORMAL 'T NORMAL	14.50	407.23	28.0850	OH WITHHOLD	94.42	194.92
3L NORMAL	22.00 7.00	634.38 263.20	28.8350 37.6000	FA SUTA INITIATION	1.25 0.00	3,20 100.00
	2,115.02	585.08	1529.	94 5,329.30	1,319.31	4,018.99
	CURRENT EARNINGS C		NET PAY	Y.T.D. EARNINGS	Y.T.D. DEDUCTIONS	Y.T.D. NET PAY
	CONTRACTING CO.	-		-		
1491 MCCC	DY PAUL A EMPLOYEE NAM	E SOC	69-76-5216 MAL SECURITY NO.	5 03/31/08 04/0 PERIOD BEG. PERIOD	06/08 074216 NC	, 74210
EARNINGS	be a solution president with some cost of the solution of	CURRENT AMOUNT	YEAR TO DATE	DEDUCTIONS.	Providence and the second s	
REG NORMAL	40.00	799.36 0.00	2000.80 238.72	UNION DUES WI APPRENTICESHI		15.7 10.9
			200.72	HOURLY DUES	0.80	2.1
ARNINGS EG NORMAL	HOURS 8.00	CUR AMT 158.40	RATE	UNION DEDS	0.00	12.3
REG NORMAL	32.00	640.96	19.8000 20.0300	FED WITHHOLD SOC. SEC.	52.64 49.56	145.9 138.8
				MEDICARE	11.59	32.4
				OH WITHHOLD PA SUTA	24.12 0.49	67.3 1.3
				INITIATION	0.00	100.0

799.36 153.58 645.78 2,239.52 327.38 1,712.44

ALEX E. PARIS C	ontracting Com	PANY, INC.				
91 MCCOY	PAUL A EMPLOYEE NAME	2 SO	69-76-5216 CIAL SECURITY NO.	04/21/08 04/27 PERIOD BEG. PERIOD EI	/08 074880 NO.	74860
EARNINGS	HRS/UNITS C	URRENT AMOUNT	YEAR TO DATE	DEDUCTIONS	CURRENT AMOUNT	YEAR TO DATE
G NORMAL	40.00	801.21	4404.43	UNION DUES WI	11.50	27.21
T NORMAL	3.00	84.26	1547.14	APPRENTICESHI	4.30	28.25
L NORMAL		0.00	263.20	HOURLY DUES	0.86	5.65
IMBURSABLE		0.00	9.00	UNION DEDS	0.00	39.1
				FED WITHHOLD	65.56	595.40
RNINGS	HOURS	CUR AMT	RATE	SOC. SEC.	54.90	385.3
G NORMAL	40.00	801.21	20.0300	MEDICARE	12.84	90.12
T NORMAL	3.00	84.26	28.0850	OH WITHHOLD	28.32	223.24
				PA SUTA INITIATION	0.53 0.00	3.73 100.00
	885.47	178.81		•	1,498.12	4,725.65
PAY RATE C	URRENT EARNINGS C	URRENT DEDUCTION	S NET PAY	Y.T.D. EARNINGS	Y.T.D. DEDUCTIONS	Y.T.D. NET PAY
ALEX E. PARIS C	ONTRACTING CON	ipany, inc.				75400
91 MCCON	PAUL A EMPLOYEE NAME	2 SC	69-76-5216 DCIAL SECURITY NO.	04/28/08 05/04 PERIOD BEG. PERIOD E	ND. CHECK NO.   NO.	75103
EARNINGS	the second states and the second second second	URRENT AMOUNT	YEAR TO DATE	DEDUCTIONS	CURRENT AMOUNT	YEAR TO DATE
G NORMAL	40.00	801.20	5205.63	UNION DUES WI	12.71	51.80
T NORMAL	6.00	168.51	1715.65	APPRENTICESHI	4.60	32.8
L NORMAL		0.00	263.20	HOURLY DUES	0.92	6.5
G OTHER		40.00	40.00	UNION DEDS	0.00	27.2
TMBURSABLE		0.00	9.00	FED WITHHOLD	84.20	679.6
				SOC. SEC.	62.60	447.9
RNINGS	HOURS	CUR AMT	RATE	MEDICARE	14.64	104.7
G OTHER		40.00	0.0000	OH WITHHOLD	34.46	257.7
G NORMAL	40.00	801.20	20.0300	PA SUTA	0.60	4.3
T NORMAL	6.00	168.51	28.0850	INITIATION	0.00	100.0

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And a second	· · · · · · · · · · · · · · · · · · ·					
	1,009.71	214.73	794.98	7,224.48	1,712.85	5,520.63
				Y.T.D. EARNINGS	Y.T.D. DEDUCTIONS	Y.T.D. NET PAY
PAY RATE	CURRENT EARNINGS	CURRENT DEDUCTIONS	NET PAY	T.I.D. EARININGS	1.1.D. DEDOG Holdo	

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409.44 103.06

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		Alle belle i lines				
4491 MC	COY PAUL A	26	59-76-5216 IAL SECURITY NO.	05/05/08 05/1 PERIOD BEG. PERIOD	1/08 075352	. 75302
EMP. NO. I DEPT. EARNINGS	EMPLOYEE NAM		IAL SECURITY NO. YEAR TO DATE			
REG NORMAL	40.00	801.21	and the second	DEDUCTIONS	CURRENT AMOUNT	VEAR TO DATE:
OVT NORMAL	40.00	0.00	6006.84 1715.65	UNION DUES WI APPRENTICESHI	$\begin{array}{c} 10.40\\ 4.00\end{array}$	37.6
OBL NORMAL		0.00	263.20	HOURLY DUES	4.00 0.80	36.E 7.3
REG OTHER		0.00	40.00	UNION DEDS	0.00	51.8
REIMBURSABL	E	0.00	9.00	FED WITHHOLD	52.92	732.5
	NOUDO		-	SOC. SEC.	49.68	497.5
EARNINGS REG NORMAL	HOURS 40.00	CUR AMT 801.21	RATE 20.0300	MEDICARE OH WITHHOLD	11.62	116.3
	40.00	001.21	20.0300	PA SUTA	24.20 0.00	281.9 4.3
				INITIATION	0.00	4.5
PAY RATE	801.21 CURRENT EARNINGS	153.62 CURRENT DEDUCTIONS	<b>647.</b> NET PAY	59 8,025.69 Y.T.D. EARNINGS	1,866.47	6,168.22 Y.T.D. NET PAY
ALEX E. PARI	S CONTRACTING COM	VPANY, INC.		ana mana mana kana mana basa kasa mana ana kara da kana kana kana kana kana kana kana	a no a socia a socio i contra de la contra de	
491 MCC	OY PAUL A	25	9-76-5216	05/12/09 05/10	100 075047	75947
IMP. NO.   DEPT.	EMPLOYEE NAM		9-76-5216 IAL SECURITY NO.	05/12/08 05/18 PERIOD BEG. PERIOD I	END, CHECKINO, INC	
EARNINGS		Cardon and Andrews and Andrews and Andrews and	YEAR TO DATE	DEDUCTIONS	CURRENT AMOUNT	NATALE CONTRESS
EG NORMAL VT NORMAL	40.00	801.21	6808.05	UNION DUES WI	12.16	64.01
BL NORMAL	5.50	$154.47 \\ 0.00$	1870.12 263.20	APPRENTICESHI	4.55	41.40
EG OTHER		0.00	40.00	HOURLY DUES UNION DEDS	0.91 0.00	9.27 37.6
ZIMBURSABLE	1	0.00	9.00	FED WITHHOLD	76.09	308.61 308.61
بسر بسر مو مو مو مو				SOC. SEC.	59.25	556.8
ARNINGS BG NORMAL	HOURS	CUR AMT	RATE	MEDICARE	13.86	130.2:
VT NORMAL	40.00 5.50	801.21 154.47	20.03 <b>00</b> 28.0850	OH WITHHOLD PA SUTA	31.79	313.69
		1 U 1 1 1 1	25,0000	INITIATION	0.00 0.00	4.31 100.00
						100.00
	955.68	198.61	757.0	<b>)7</b> 8,981.37	2,065.08	6,925.29
PAY FLATE	CURRENT EARNINGS	URRENT DEDUCTIONS	NET PAY	Y.T.D. EARNINGS	Y.T.D. DEDUCTIONS	Y.T.D. NET PAY
alex e. paris	s contracting cor	Fany, Ind.				
491 MCC	EMPLOYEE NAME	26 soci	9-76-5216 AUSECURITY NO	03/17/08 03/23 PERIOD BEG. PERIOD E	ND. CHECKILO. I NO	73780
FARMINGS EG NORMAL				DEDUCTIONS		
ag NORMAL	21.00	409.44	409.44	UNION DUES WI APPRENTICESHI	5.33 2.10	a. :
ARNINGS	HOURS	CUR AMT	RATE	HOURLY DUES	2.1.0 0.42	4 - 1 6 - 11
EG NORMAL	4.00	72.84	18.2100	FED WITHHOLD	5.94	5. C
EG NORMAL	17.00	336.60	19.8000	SOC. SEC.	25,39	25.07
				MEDICARE	5.94	<u>(</u>
				OH WITHHOLD FA SUTA	7.70 0.24	- 7.70 ⊘.2
				INITIATION	0.24 50.00	10 1 50,00
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50H Dept: 4384 FMCNA - Salem 0H019

005031-005031

Renal Care Group, Inc. 784 Melrose Avenue Nashville, TN 37211

Emplid: 18596 Exemptions Add1 Amt Add1 % Fed: M-O OH(R): S-0

94.25

Account

Gross Pay

Fed MED/EE Fed OASDI/EE

Fed Withholdng

OH Withholdng

OH SALEM Withholdng

Total Tax Deductions

Deposit Type

Deposit Che 🕻

Net Check

Taxes

Earnings	Hrs	Current	YTD Hrs	YTD
PTO Hourly	40.00	514.58	40.00	514.58
Regular	40.00	514.58	583.50	7506.45
Overtime	9.00	174.15	66.00	1274.34
Evening Diff	5.25	5.25	26.75	26.75
Holiday Diff.1	0.00	0.00	12.25	15.76

Deductions	Current	YTD
*Medical	187.34	1498.72
*Dental	23.75	190.00
*Spectera Vision	5.97	47.76
Short Term Disabi	9.26	74.08

**Earnings Statement** 

Pay Rate:

Pay Period:

Advice Date:

Advice Number:

THERESA A MCCOY 11500 St. Rt. 170 Negley, OH 44441

Batch Number:

Page 001 of 001

\$12.864537 Hourly

04/11/2008

0001148756

00000000224

03/23/2008 - 04/05/2008

	9.00	1/4.15	00.00	12/4.34	
Diff	5.25	5.25	26.75	26.75	
Diff.1	0.00	0.00	12.25	15.76	

1208.56

72.69 14.38

61.49

24.47

182.95

9.92

728.50

Amount

799.29

0.00

9337.88

548.06

110.24

471.38

182.65

76.02

1388.35

Total D	0000000000	cions		226.	6000.0000	000000000000000000000000000000000000000		).56
Net Pay				799.	.29	6	138	3.97
*Before	Tax	exclu	ided	from	fed	taxab	le	wage
Fed Tax	able	Wages		991.	.68	7	602	2.84

	Emp	bioyer	Pala	Benetits	(**taxapi	e)			
	Medi	cal		380.0	9 304	40.72			
	Dent	al		10.18	B a	81.44			
	Basi	c Life		2.3	9	19.12			
AD & D				0.2	7	2.16			
	Long	Term D	isabil	4.5	3 3	32.04			
	Basic Life**			0.18	В	1.44			
	Leave Balance Summary								
		Start	Earn	ed Takei	n Adj	End			
	рто	284.32	64.	61 40.00	0.00	308.93			
	ESL	41.58	10.	78 0.00	0.00	52.36			

			РТО	284.32	64.61	40.00	0.00	308.93	
			ESL	41.58	10.78	0.00	0.00	52.36	
							© 2002 /	Automatic Data Proces	ssing (PCSUVO)
rify dogument	AUTHENTICITY - COLORED ARI	EA MUST CHANGE IN TON	NE GRADUALLY A	ND EVENI	Y FROM D	ARK AT TO	OP TO LIC	THE REAL	BOIRDON
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A star for annual star	KARANA MANA						34 1000		Marine Con
	Renal Care Group, Inc.							A	3. R.S.
	784 Melrose Avenue			- 新して - D	Advice N	umøer:	000114	8/20	
and the second second	Not Mellose Avenue	승규는 집에서 가지 않는 것	17 A - 2 A - 2 - 10 - 10 - 10 - 10 - 10 - 10 - 10			Star Sala - In	「新聞」フ		S. 16 4
and the second secon	Nashville, TN 37211			11 N / AN	Advice D	oto	04/1	1/2008	F <sup>arrie</sup> ydd
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THERESA	A MCCOY	Checking	XXXXX4448			1		799.	29
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# **NON-NEGOTIABLE**

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TEAR HERE

50H Dept: 4384 FMCNA - Salem OH019

005339-005339

Renal Care Group, Inc. 784 Melrose Avenue Nashville, TN 37211

Emplid: 18596 Addl Amt Addl % Exemptions Fed: M-O OH(R): S-0

Earnings	Hrs	Current	YTD Hrs	YTD
Regular	80.00	1029.16	663.50	8535.61
Overtime	5.75	110.96	78.50	1515.91
Overtime	6.75	130.61	0.00	0.00
Evening Diff	5.00	5.00	31.75	31.75
Holiday Diff.1	0.00	0.00	12.25	15.76
PTO Hourly	0.00	0.00	40.00	514.58

Deductions	Current	YTD
*Medical	187.34	1686.06
*Dental	23.75	213.75
*Spectera Vision	5.97	53.73
Short Term Disabi	9.26	83.34

**Earnings Statement** 

Pay Rate:

Pay Period:

Advice Date:

Advice Number:

Batch Number:

Takal Baduatia

THERESA A MCCOY 11500 St. Rt. 170 Negley, OH 44441

Page 001 of 001

04/25/2008

0001155347

00000000229

\$12.864537 Hourly

04/06/2008 - 04/19/2008

Gross Pay 97.50	12/5./3 825.0	0 10613.61
Taxes		
Fed Withholdng	82.77	630.83
Fed MED/EE	15.35	125.59
Fed OASDI/EE	65.64	537.02
OH Withholdng	27.18	209.83
OH SALEM Withholdng	10.59	86.61

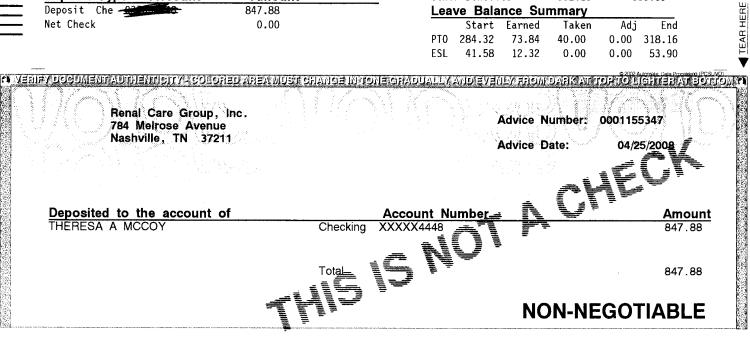
Case - Dave

**Jotal Tax Deductions** 201.53 1589.88

Deposit Type Account	Amount	
Deposit Che <u>O</u>	847.88	
Net Check	0.00	

lotal veductions	220.32	2030.88
Net Pay	847.88	6986.85
*Before Tax excluded	from fed	taxable wages
Fed Taxable Wages	1058.85	8661.69
Employer Paid Be	nefits (*	taxable)
Medical	380.09	3420.81

rieur	cai		200.03	342	10.01
Dent	al		10.18	ç	91.62
Basi	c Life		2.39	2	21.51
AD &	D		0.27		2.43
Long	Term Di	sabil	4.53	3	86.57
0the	r Benefi	ts	332.15	33	3.59
Lea	ve Bala	nce Sui	nmary		
	Start	Earned	Taken	Adj	End
PTO	284.32	73.84	40.00	0.00	318.16
ESL	41.58	12.32	0.00	0.00	53,90



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50H Dept: 4384 FMCNA - Salem 0H019 005067-005067

Renal Care Group, Inc. 784 Melrose Avenue Nashville, TN 37211

Emplid: 18596 Exemptions Addl Amt Addl % Fed: M-0 OH(R): S-0

Earnings	Hrs	Current	YTD Hrs	YTD
Retro Pay	0.00	84.54	0.00	84.54
Regular	80.00	1060.04	743.50	9595.65
Overtime	11.75	233.54	94.50	1834.33
Overtime	4.25	84.88	0.00	0.00
Evening Diff	8.50	8.50	40.25	40.25
Holiday Diff.1	0.00	0.00	12.25	15.76
PTO Hourly	0.00	0.00	40.00	514.58

Deductions	Current	YTD
*Medical	187.34	1873.40
*Dental	23.75	237.50
*Spectera Vision	5.97	59.70
Short Term Disabi	9.54	92.88

**Earnings Statement** 

Pay Rate: Pay Period:

Advice Date:

Advice Number:

Batch Number:

THERESA A MCCOY 11500 St. Rt. 170 Negley, OH 44441

Page 001 of 001

05/09/2008

0001161961

0000000234

\$13.250473 Hourly 04/20/2008 - 05/03/2008

Gross Pay 104.50	1471.50 930.5	0 12085.11
Taxes		
Fed Withholdng	119.37	750.20
Fed MED/EE	18.20	143.79
Fed OASDI/EE	77.80	614.82
OH Withholdng	34.69	244.52
OH SALEM Withholdng	12.55	99.16

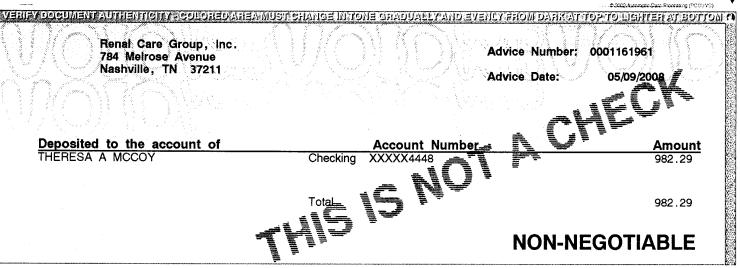
|--|

Deposit Type	Account	Amount	
Deposit Che 🎜		982.29	
Net Check		0.00	

lotal De	ductions	226.60	2263.48
Net Pay		982.29	7969.14
*Before	Tax excluded	from fed	taxable wages
Fed Taxa	ble Wages	1254.72	9916.41

Em	ployer l	Paid Be	nefits (**	*taxabl	e)
Medi	cal		380.09	38	00.90
Dent	al		10.18	10	01.80
Basi	c Life		2.48	:	23.99
AD &	D		0.29		2.72
Long Term Disabil			4.67	41.24	
Other Benefits			0.28	3.	33.87
Leave Balance Summary					
	Start	Earned	Taken	Adj	End
РТО	284.32	83.07	40.00	0.00	327.39
ESL	41.58	13.86	0.00	0.00	55.44

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50H Dept: 4384 FMCNA - Salem 0H019 005107-005107

Renal Care Group, Inc. 784 Melrose Avenue Nashville, TN 37211

Emplid: 18596 Exemptions Addl Amt Addl % Fed: M-0 OH(R): S-0

Earnings	Hrs	Current	YTD Hrs	YTD
Regular	80.00	1060.04	823.50	10655.69
Overtime	17.50	348.89	118.00	2302.96
Evening Diff	14.50	14.50	54.75	54.75
Overtime	6.00	119.74	0.00	0.00
Holiday Diff.1	0.00	0.00	12.25	15.76
PTO Hourly	0.00	0.00	40.00	514.58
Retro Pay	0.00	0.00	0.00	84.54

Deductions	Current	YTD
*Medical	187.34	2060.74
*Dental	23.75	261.25
*Spectera Vision	5.97	65.67
Short Term Disabi	9.54	102.42

**Earnings Statement** 

Pay Rate: Pay Period:

Advice Date:

Advice Number:

Batch Number:

THERESA A MCCOY 11500 St. Rt. 170 Negley, OH 44441

Page 001 of 001

05/23/2008

0001168449

00000000239

\$13.250473 Hourly 05/04/2008 - 05/17/2008

Gross Pay 118.00	1543.17 1048.5	0 13628.28
Taxes		
Fed Withholdng	122.90	873.10
Fed MED/EE	19.23	163.02
Fed OASDI/EE	82.23	697.05
OH Withholdng	37.97	282.49
OH SALEM Withholdng	13.26	112.42

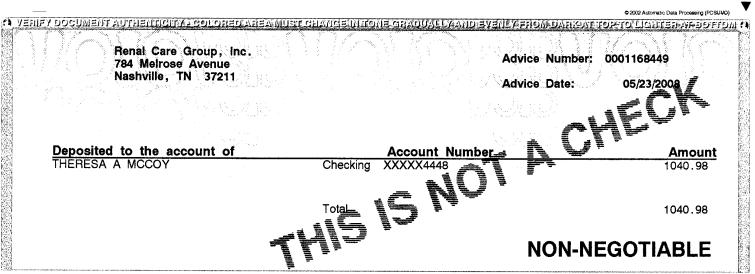
275.59

Deposit	Туре	Account	Amount	
Deposit	Che 🗲		1,040.98	
Net Check	(	-	0.00	

Total Tax Deductions

Total Deductions	226.60	2490.08
Net Pay *Before Tax excluded	1040.98	9010.12
*Before Tax excluded	from fed	taxable wages
Fed Taxable Wages	1326.39	11242.80

Em	ployer	Paid Be	nefits (**	taxabl	e)
Medi	cal		380.09	418	80.99
Dent	al		10.18	1	11.98
Basi	c Life		2.48	2	26.47
AD & D			0.29		3.01
Long Term Disabil			4.67	4	45.91
Other Benefits			0.28	3	34.15
Leave Balance Summary					
	Start	Earned	Taken	Adj	Enc
PTO	284.32	92.30	40.00	0.00	336.62
ESL	41.58	15.40	0.00	0.00	56.98



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## WARRANTY DEED (Joint & Survivor Form)



## KNOW ALL MEN BY THESE PRESENTS, That

## JEREMY DAVID HUMPHREY, UNMARRIED,

the Grantor who claims title by or through instrument, recorded in Volume 1419, Page 804,

County Recorder's Office, for the consideration of One Dollar and other valuable consideration

(\$1.00 and o.v.c.) received to Grantors full satisfaction of

PAUL A. MCCOY and THERESA A. MCCOY, HUSBAND AND WIFE, for their

joint lives, remainder to the survivor of them.

the Grantees, whose TAX MAILING ADDRESS will be 11534 SR. 170, NEGLEY, OH 44441

does

Give, Grant, Bargain, Sell and Convey unto the said Grantees, and to the survivor of them, their heirs and assigns, the following described premises:

Grantors undivided 1/2 interest in the following premises:

Situated in the Township of Middleton, County of Columbiana and State of Ohio:

Known as and being a part of the southeast quarter of Section 34, Township of Middleton, Range 1, which is more particularly bounded and described by commencing at the northwest corner of the said southeast quarter of Section 34, running thence with the quarter section line east for a distance of 880.58 feet to an iron pin; thence running south along the east line of land of Grantor for a distance of 1050 feet to an iron pin and the place of beginning of the tract herein described; thence continuing south along said Grantor's east line for a distance of 498.6 feet, be the same more or less, but to the northeast corner of Roy W. and Wilma L. Guy's First Addition in said township; thence running west along the north line of said Guy's First Addition for a distance of 776.74 feet, be the same more or less, but to a point in the centerline of State Route 170; thence running a northerly direction along the centerline of said State Route 170 on a curve to the right, the radius of which is 573.68 feet, for a distance of 349.6 feet to a point; thence running further with said centerline north for a distance of 179.3 feet, be the same more or less, but to a point which is west from the place of beginning a distance of 880.50 feet; thence running east for a distance of 880.50 feet, be the same more or less, but to the place of beginning and containing in area 7.273 acres of land, be the same more or less, but subject to all legal highways, rights of way and easements.

(Permanent Parcel No. 45-00294.000)

The property is known for street numbering purposes as 11534 SR. 170, **NEGLEY, OH 44441.** 

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•	•••	To Have and to Hold the above granted and bargained premises, with the
	 	appurtenances thereunto belonging, unto the said Grantees, and to the survivor of them, his or her separate heirs and assigns forever.
	••	And the said Grantor, for his/herself and his/her heirs, executors and administrators,
	••	hereby covenant with the said Grantees, their heirs and assigns, that said Grantor is the true and lawful owner of said premises, and is well seized of the same in fee simple, and has good right
		and full power to bargain, sell and convey the same in the manner aforesaid and that the same
	•• ••	are free and clear from all encumbrances, except conditions and restrictions of record and taxes and special assessments which will be prorated to the date of transfer, if any,
	••	and further, that said Grantor will warrant and defend the same against all claims of all persons whatsoever, except as hereinbefore provided.
	 	And for valuable consideration
	 	does hereby remise, release and forever quit-claim unto the said Grantees, their heirs and assigns, all right and expectancy of <b>Dower</b> in the above described premises.
	••	Executed, the <u>30</u> day of <u>August</u> , in the year of our Lord TWO THOUSAND SIX (2006).
	 	Signed and acknowledged in presence of:
	 	Katelen Economon Jeremy David HUMPHREY
	  	(molu L. Distoto
	•• •• ••	Image ID: 000000501236 Type: OFF
	••	File# 2006-00013875
	••	STATE OF Colorado, county of Jefferson, ss.
	•• ••	COUNTY OF Jefferson)ss.
	••	Before me, a Notary Public in and for said County and State, personally appeared the above named
		JEREMY DAVID HUMPHREY, UNMARRIED,
	•• ••	who acknowledged that he/she did sign the foregoing instrument and that the same is his/her free act and deed.
	••	In Testimony Whereof, I have hereunto set my hand and official seal, at
	••	Youngstown, Ohio, this 30 day of Quaust, A.D. 2006. Golder, CO (4)
	••	Lipa Carrilla
	••	INOLATY TRUCKARA INT
	••	My Commission Expires
	••	This instrument prepared by:
	••	ATTORNEY RICHARD J. MASTRIANA
	•• ••	755 BOARDMAN-CANFIELD ROAD
	••	YOUNGSTOWN, OHIO 44512 (330) 726-8300

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179 PAGE 676 8°-5679 L VOL WARRANTY DEED----No. 102A The Ohio Legal Blank Co. Cleveland Chut. We, James B. White and Ina Rose White, husband and wife, , the Grantor s title by or through instrument, recorded in Volume 1231Page 791 who claim County Recorder's Office, for the consideration of Ten Dollars and other good and valuable considerations ----- Dottars (\$ 10.00etc.) received to our Paul A. McCoy and Theresa A. McCoy, full satisfaction of husband and wife, for their joint lives, remainder to the survivor of them, the Grantees, whose TAX MAILING ADDRESS will be 11702 St. Rte. 170 Negley, Ohio 44441 do Give. Grant, Wargain, Sell and Couvey unto the said Grantees, their heirs and assigns, the following described premises, situated in the Township of Middleton , County of Columbiana and State of Ohio: Situate in the County of Columbiana in the State of Ohio and in the Township of Middleton and bounded and described as follows, viz: TRACT ONE: Situated in the State of Ohio, County of Columbiana and Middleton Township and known as and being Lots numbered Four (4) and Five (5) as the same are designated and described on the recorded plat of Frank Trotter's First Addition to Cottage Hill, in said Township, said plat being recorded in Volume 8-A, Page 82 of the Records of Plats of Columbiana County, Ohio. TRACT TWO: Situated in the State of Ohio, County of Columbiana and Middleton Township and being a part of the southeast quarter of Section Thirty-four (34), Township Seven (7) (Middleton Township), Range One (1) and being more fully described as follows: beginning at the Northeast corner of Lot Number Four (4) as the same is designated and described on the recorded plat of Frank Trotter's First Addition to Cottage Hill in said Township, said plat being recorded in Volume 8-A, Page 82 of the Records of Plats of Columbiana County, Ohio, and running thence from said place of beginning North 89° 50' East a distance of 665.5 feet to a stake on Grantor's east line; thence with said line south a distance of 264.0 feet to a point thence South 89° 50' West a distance of 880.5 feet to a point on the quartersection line of said Section Thirty-four (34); thence North along said quarter-section line, a distance of sixty (60) feet to the southwest corner of Lot Number Five (5) of said "Cottage Hill" Addition; thence with the south line of said lot number Five (5), east a distance of 215 feet to the southeast corner of said Lot Number Five (5); thence along the east line of said lots numbered four (4) and five (5), north a distance of 204 feet to the place of beginning, containing in area 4.33 acres, more or less but subject to all legal highways.

This Conveyance has been examined and the Gritmor has complied with Bection \$18,202 of the Revised Code. 220

Mentilian Absurger Do. Order No. <u>K1-2</u>25 621

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appurtenances thereof, unto the said Grantee and bargained premises, with the \*Paul A. McCoy and Theresa A. McCoy, husband and wife, for their joint lives, remainder to the survivor of them, And We , James B. White and the survivor of them. And We , James B. White and Ina Rose White, husband and wife , the said Grantor s, do for ourselves and our heirs, executors and administrators, covenant with the said Grantee s their heirs and assigns, that at and until the ensealing of these presents, we are well seized of the above described premises, as a good and indefeasible estate in FEE SIMPLE, and have good right to bargain and sell the same in manner and form as above written, and that the same are free from all incumbrances whatsoever will Warrant and Telena said premises, with the appurtenances and that we heirs and assigns, against thereunto belonging, to the said Grantee s, their all lawful claims and demands whatsoever And for valuable consideration we, James B. White and Ina Rose White, husband and wife do hereby remise, heirs and assigns, release and forever quit-claim unto the said Grantees, their right and expectancy of **Nourt** in the above described premises. our all have hereunto set our hand s, the 22nd In Witness Whereof we , in the year of our Lord one thousand nine hundred day of June and eighty-eight. Signed and acknowledged in presence of State of Ohio Before me, a Notary Public in and for said County and State, personally appeared Columbiana County, 88. James B. White and Ina Rose White, husband and wife the above named who acknowledged that they did sign the foregoing instrument and that the same is their free act and deed. In Testimony Whereas, I have hereunto set my hand and official seal, at Lisbon, Ohio this 22nd day of June A. D. 19 88. This instrument prepared by: ATTORNEY JERRY J. WARD NUTRENTRY WEIUB ALDONEY, at Law PIKE & WARD Notary Public -- State of Ollio ψJ LISBON, OHIO My Commission Has No Expiration Date CROFILM Sec. 147.03 R. C. RECORDE Ц. È 8