

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF OHIO

Case number (if known)

Chapter you are filing under:

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Kevin  
First name

Middle name

Bring your picture identification to your meeting with the trustee.

Finnerty  
Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Kevin J. Finnerty

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-3959

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

I have not used any business name or EINs.

I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s) \_\_\_\_\_

Business name(s) \_\_\_\_\_

EINs \_\_\_\_\_

EINs \_\_\_\_\_

**5. Where you live**

16740 Messenger Road  
Chagrin Falls, OH 44023  
Number, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

Geauga  
County

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

I have another reason. Explain. (See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.

Chapter 7

Chapter 11

Chapter 12

Chapter 13

8. **How you will pay the fee**  **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

**I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

**I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?**  No.

Yes.

District	<u>Northern District</u>	When	<u>4/01/14</u>	Case number	<u>14-12056</u>
District	<u>Northern District</u>	When	<u>8/07/12</u>	Case number	<u>12-15784</u>
District	<u>Northern District</u>	When	<u>4/15/11</u>	Case number	<u>11-13192</u>

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**  No

Yes.

Debtor	_____	Relationship to you	_____
District	_____	When	_____
Case number, if known	_____		
Debtor	_____	Relationship to you	_____
District	_____	When	_____
Case number, if known	_____		

11. **Do you rent your residence?**  No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

- No. Go to Part 4.
- Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number, Street, City, State & ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).*

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

- No. I am not filing under Chapter 11.
- No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

- No.
- Yes. What is the hazard? \_\_\_\_\_
- If immediate attention is needed, why is it needed? \_\_\_\_\_

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property? \_\_\_\_\_

\_\_\_\_\_  
Number, Street, City, State & Zip Code

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

**I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

**I am not required to receive a briefing about credit counseling because of:**

**Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

**I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

**I am not required to receive a briefing about credit counseling because of:**

**Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts  
 \_\_\_\_\_

17. Are you filing under Chapter 7?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No  
 Yes

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

18. How many Creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input checked="" type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below**

**For you** I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, 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.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kevin Finnerty  
 \_\_\_\_\_  
 Kevin Finnerty  
 Signature of Debtor 1

Signature of Debtor 2  
 \_\_\_\_\_

Executed on March 29, 2017 Executed on \_\_\_\_\_  
 MM / DD / YYYY MM / DD / YYYY

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not represented by an attorney, you do not need to file this page.**

/s/ Dennis J. Kaselak  
Signature of Attorney for Debtor

Date March 29, 2017  
MM / DD / YYYY

Dennis J. Kaselak  
Printed name

Petersen & Ibold  
Firm name

401 South Street  
Chardon, OH 44024-1495  
Number, Street, City, State & ZIP Code

Contact phone (440) 285-3511

Email address dkaselak@peteribold.com;  
rstanley@peteribold.com

0029133  
Bar number & State

Certificate Number: 12459-OHN-CC-028981273



12459-OHN-CC-028981273

## CERTIFICATE OF COUNSELING

I CERTIFY that on March 26, 2017, at 5:54 o'clock PM PDT, Kevin Finnerty received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 26, 2017 By: /s/Hokulani Kabaka

Name: Hokulani Kabaka

Title: Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).



**Fill in this information to identify your case:**

Debtor 1 Kevin Finnerty  
 First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number \_\_\_\_\_  
 (if known)

Check if this is an amended filing

**B 104**  
**For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders**

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

**Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.**

			Unsecured claim
<b>1</b>	Alliance One Receivables 4850 E. Street Road, Suite 300 Feasterville Trevose, PA 19053	<b>What is the nature of the claim?</b> <u>Medical Bills</u>	<u>\$ \$543.00</u>
<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____			
_____ Contact _____ _____ Contact phone _____			

<b>2</b>	Burton Scot Excavating Inc. 11330 Kinsman Road Newbury, OH 44065	<b>What is the nature of the claim?</b> <u>16740 Messenger Road</u> <u>\$ \$225,000.00</u> <u>Auburn Township, Ohio</u> <u>44023</u> <u>Residence</u>	
<b>As of the date you file, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b> <input checked="" type="checkbox"/> No			
_____ _____			

Contact \_\_\_\_\_  Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Contact phone \_\_\_\_\_ Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

3

Charter One  
 P.O. Box 789  
 Providence, RI 02901

**What is the nature of the claim?** 16740 Messenger Road \$ \$113,592.00  
 Auburn Township, Ohio  
 44023  
 Residence

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \$113,742.00  
 Value of security: - \$ \$249,900.00  
 Unsecured claim \$ \$113,592.00

Contact \_\_\_\_\_  
 Contact phone \_\_\_\_\_

4

Fidelity National Ins.  
 Corporate Headquarters  
 601 Riverside  
 Jacksonville, FL 32204

**What is the nature of the claim?** Claim for contribution \$ \$280,000.00

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

Contact \_\_\_\_\_  
 Contact phone \_\_\_\_\_

5

First National Bank of PA  
 4140 E State St.  
 Hermitage, PA 16148

**What is the nature of the claim?** 17184 Munn Road \$ \$287,585.00  
 Auburn Township, Ohio  
 44023  
 Residential and  
 Commercial Property

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \$287,585.00  
 Value of security: - \$ \$100,000.00  
 Unsecured claim \$ \_\_\_\_\_

Contact \_\_\_\_\_  
 Contact phone \_\_\_\_\_

\$287,585.00

**6**

First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

**What is the nature of the claim?**

Business Debt

\$ \$102,000.00

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
Value of security: - \$ \_\_\_\_\_  
Unsecured claim \$ \_\_\_\_\_

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

**7**

First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

**What is the nature of the claim?**

14563 Kirtland Street  
Burton, Ohio  
Residential and  
Commercial Property

\$ \$14,949,746.00

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \$14,949,746.00  
Value of security: - \$ \$130,000.00  
Unsecured claim \$ \$14,949,746.00

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

**8**

First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

**What is the nature of the claim?**

16740 Messenger Road  
Auburn Township, Ohio  
44023  
Residence

\$ \$1,494,974.00

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \$1,494,974.00  
Value of security: - \$ \$249,900.00  
Unsecured claim \$ \$1,494,974.00

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

**9**

**What is the nature of the claim?**

16740 Messenger Road

\$ \$287,585.00

Debtor 1 Kevin Finnerty Case number (if known) \_\_\_\_\_



First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

Auburn Township, Ohio  
44023  
Residence

- As of the date you file, the claim is:** Check all that apply
- Contingent
  - Unliquidated
  - Disputed
  - None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \$287,585.00  
Value of security: - \$ \$249,900.00  
Unsecured claim \$ \$287,585.00

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

10

First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

**What is the nature of the claim?** 17184 Munn Road \$ \$10,963.00  
Auburn Township, Ohio  
44023  
Residential and  
Commercial Property

- As of the date you file, the claim is:** Check all that apply
- Contingent
  - Unliquidated
  - Disputed
  - None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \$110,963.00  
Value of security: - \$ \$100,000.00  
Unsecured claim \$ \$10,963.00

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

11

GC Services  
Attn: Collections  
6330 Gulfton  
Houston, TX 77081

**What is the nature of the claim?** Utilities \$ \$80.00

- As of the date you file, the claim is:** Check all that apply
- Contingent
  - Unliquidated
  - Disputed
  - None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
Value of security: - \$ \_\_\_\_\_  
Unsecured claim \$ \_\_\_\_\_

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

12

H.S.B.C. Bank USA  
P.O. Box 9  
Buffalo, NY 14240

**What is the nature of the claim?** Credit card purchases \$ \$14,226.00

- As of the date you file, the claim is:** Check all that apply
- Contingent
  - Unliquidated

- Disputed
- None of the above apply

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

13

Harvard Collection Serv, I  
 4839 N. Elston Ave  
 Attn: Betty  
 Chicago, IL 60630

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**What is the nature of the claim?** Utilities \$ \$209.00

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

14

Huntington National Bank  
 2361 Morse Rd.  
 Columbus, OH 43229

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**What is the nature of the claim?** 14563 Kirtland Street \$ \$20,732.00  
Burton, Ohio  
Residential and  
Commercial Property

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \$57,364.00  
 Value of security: - \$ \$130,000.00  
 Unsecured claim \$ \$20,732.00

15

IRS  
 Kansas City, MO 64999-0030

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_

**What is the nature of the claim?** Personal Income Tax \$ Unknown

**As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed
- None of the above apply

**Does the creditor have a lien on your property?**

- No
- Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_

Debtor 1 Kevin Finnerty Case number (if known) \_\_\_\_\_

Contact phone \_\_\_\_\_ Unsecured claim \$ \_\_\_\_\_

**16** **What is the nature of the claim?** Credit card purchases \$ \$10,574.00

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

**16** PNC Bank  
 One Financial Pkwy  
 Kalamazoo, MI 49009

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**17** **What is the nature of the claim?** 16740 Messenger Road \$ \$594,682.00  
Auburn Township, Ohio  
44023  
Residence

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \$594,682.00  
 Value of security: - \$ \$249,900.00  
 Unsecured claim \$ \$594,682.00

**17** Raymond L. Simpson  
 18096 Munn Road  
 Chagrin Falls, OH 44023

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**18** **What is the nature of the claim?** 16740 Messenger Road \$ \$594,682.00  
Auburn Township, Ohio  
44023  
Residence

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
 Value of security: - \$ \_\_\_\_\_  
 Unsecured claim \$ \_\_\_\_\_

**18** Raymond L. Simpson  
 18096 Munn Road  
 Chagrin Falls, OH 44023

\_\_\_\_\_  
 \_\_\_\_\_  
 Contact \_\_\_\_\_  
 \_\_\_\_\_  
 Contact phone \_\_\_\_\_

**19** **What is the nature of the claim?** Personal Income Tax \$ \$16,313.00

**19** State of Ohio

Debtor 1 Kevin Finnerty Case number (if known) \_\_\_\_\_

Department of Taxation  
P.O. Box 2476  
Columbus, OH 43266-0076

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
Contact phone \_\_\_\_\_

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
Value of security: - \$ \_\_\_\_\_  
Unsecured claim \$ \_\_\_\_\_

20

State of Ohio  
Department of Taxation  
P.O. Box 2476  
Columbus, OH 43266-0076

**What is the nature of the claim?** Personal Liability for Sales Tax and Personal Income Tax \$ \$15,960.00

**As of the date you file, the claim is:** Check all that apply  
 Contingent  
 Unliquidated  
 Disputed  
 None of the above apply

\_\_\_\_\_  
\_\_\_\_\_  
Contact \_\_\_\_\_  
Contact phone \_\_\_\_\_

**Does the creditor have a lien on your property?**  
 No  
 Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
Value of security: - \$ \_\_\_\_\_  
Unsecured claim \$ \_\_\_\_\_

**Part 2: Sign Below**

**Under penalty of perjury, I declare that the information provided in this form is true and correct.**

X /s/ Kevin Finnerty  
Kevin Finnerty  
Signature of Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date March 29, 2017

Date \_\_\_\_\_

Alliance One Receivables  
4850 E. Street Road, Suite 300  
Feasterville Trevose, PA 19053

Burton Scot Excavating Inc.  
11330 Kinsman Road  
Newbury, OH 44065

Carlisle, McNellie, Rini  
24755 Chagrin Blvd, Suite 200  
Beachwood, OH 44122

Charter One  
P.O. Box 789  
Providence, RI 02901

Fidelity National Ins.  
Corporate Headquarters  
601 Riverside  
Jacksonville, FL 32204

First National Bank of PA  
4140 E State St.  
Hermitage, PA 16148

GC Services  
Attn: Collections  
6330 Gulfton  
Houston, TX 77081

H.S.B.C. Bank USA  
P.O. Box 9  
Buffalo, NY 14240

Harvard Collection Serv, I  
4839 N. Elston Ave  
Attn: Betty  
Chicago, IL 60630

Huntington National Bank  
2361 Morse Rd.  
Columbus, OH 43229



IRS  
Kansas City, MO 64999-0030

Notre Dame Cathedral Latin  
13000 Auburn Road  
Chardon, OH 44024

PNC Bank  
One Financial Pkwy  
Kalamazoo, MI 49009

Prarie Dog Partners LLC  
16740 Messenger Road  
Chagrin Falls, OH 44023

Raymond L. Simpson  
18096 Munn Road  
Chagrin Falls, OH 44023

RBS Citizens  
CCO Mortgage  
10561 Telegraph Rd.  
Glen Allen, VA 23059

Regional Income Tax Agency  
P.O. Box 477900  
Broadview Heights, OH 44147

Richard McNellie Attorney  
24755 Chagrin Boulevard  
Suite 200  
Beachwood, OH 44122

State of Ohio  
Department of Taxation  
P.O. Box 2476  
Columbus, OH 43266-0076

Steven Elder, Esq.  
731 Fife Ave  
Wilmington, OH 45177

Suzanne Finnerty  
16740 Messenger Road  
Burton, OH 44021