B1 (Official For	rm 1)(1/0	(8)											
			United So			ruptcy t of Ohi					Vol	untary	Petition
Name of Debtor (if individual, enter Last, First, Middle): Saunders, Colin							Name of Joint Debtor (Spouse) (Last, First, Middle): Saunders, Tracy L						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							All Of (include)	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits (if more than one		Sec. or Indi	vidual-Taxpa	nyer I.D. (ITIN) No./0	Complete E		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-7185					
Street Address of 100 Plyma Gallipolis,	le Road	*	Street, City, a	and State)	:	ZIP Code	100 Ga	Street Address of Joint Debtor (No. and Street, City, and State): 100 Plymale Road Gallipolis, OH ZIP Code					
G CD		C.I. D.:	' 151	CD :		45631		CD '1	6.1	D ' ' 1 DI			45631
County of Resid							Ga	llia	ence or of the	•			
Mailing Addres	ss of Deb	tor (if diffe	rent from str	eet addres	s):		Mailir	ig Address	of Joint Debt	or (if differe	nt from stree	et address):	
					_	ZIP Code							ZIP Code
Location of Print (if different from													1
	Type of					of Business		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)					
(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.)						,	Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 12 Chapter 13 Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) Debts are primarily consumer debts,						
u				unde	(Check box, if applicable) ☐ Debtor is a tax-exempt organizati- under Title 26 of the United State Code (the Internal Revenue Code			zation defined in 11 U.S.C. § 101(8) as business debts. tates "incurred by an individual primarily for					
Euli Eiling I	Ess strasl	0	ee (Check or	ne box)				one box:	a small busin	Chapter 11		11 11 5 C 8	101(51D)
■ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Check	 ■ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: ■ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: □ A plan is being filed with this petition. □ Acceptances of the plan were solicited prepetition from one or more 							
Statistical/Adn	ninistrati	ive Inform	ation *	** Micha	ael W. Wa	arren OH		classes of	creditors, in	accordance		.C. § 1126(b	0).
Statistical/Administrative Information *** Michael W. Warren OH-0074557 *** □ Debtor estimates that funds will be available for distribution to unsecured creditors. □ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.													
Estimated Num	_	_								1			
1- 5	□ 50- 99	100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
\$0 to \$ \$50,000 \$	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
\$0 to \$	ilities	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Saunders, Colin Saunders, Tracy L (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Michael W. Warren May 1, 2009 Signature of Attorney for Debtor(s) (Date) Michael W. Warren OH-0074557 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. 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

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

Saunders, Tracy L

Signature(s) of Debtor(s) (Individual/Joint)

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

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

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

X /s/ Colin Saunders

Signature of Debtor Colin Saunders

X /s/ Tracy L Saunders

Signature of Joint Debtor Tracy L Saunders

Telephone Number (If not represented by attorney)

May 1, 2009

Date

Signature of Attorney*

X /s/ Michael W. Warren

Signature of Attorney for Debtor(s)

Michael W. Warren OH-0074557

Printed Name of Attorney for Debtor(s)

Warren Law Firm

Firm Name

6 Consumer Center Drive Chillicothe, OH 45601

Address

Email: mwarren@buckeyelegal.com (740) 774-4357 Fax: (866) 503-7887

Telephone Number

May 1, 2009

Date

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

Signature of 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

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

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

(Check only one box.)

Name of Debtor(s):

Saunders, Colin

- ☐ 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.

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Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

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

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

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

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

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

United States Bankruptcy Court Southern District of Ohio

	Colin Saunders			
In re	Tracy L Saunders		Case No.	
		Debtor(s)	Chapter	11

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

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
- ☐ 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. [Summarize exigent circumstances here.] ____

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.

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ 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: // / Colin Saunders Colin Saunders
Date: May 1, 2009

United States Bankruptcy Court Southern District of Ohio

	Colin Saunders			
In re	Tracy L Saunders		Case No.	
		Debtor(s)	Chapter	11

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☐ 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/ Tracy L Saunders Tracy L Saunders
Date: May 1, 2009

AEP PO BOX 13447 Roanoke, VA 24034

American Education Services P.O. Box 2461 Harrisburg, PA 17105-2461

AT&T PO Box 6416 Carol Stream, IL 60197-6416

Bank of America/MBNA 655 Paper Mill Rd Mail Stop 1411 Wilmington, DE 19884

David Evans 463 Second Ave Gallipolis, OH 45631

David L Raymor 9040 State Route 7 South Gallipolis, OH 45631

Dell Financial PO BOX 6403 Carol Stream, IL 60197

Deutsche Bank Elt Academic Ln Group P.O. Box 3059 Milwaukee, WI 53201-3059

Great Lakes
P.O. Box 3059
Milwaukee, WI 53201-3059

Heather & Jacob Hall 8050 State Route 7 South Gallipolis, OH 45631

Holzer 90 Jackson Pike Gallipolis, OH 45631

Javitch, Block, & Rathbone, LLC 602 Main St, #500 Cincinnati, OH 45202

Jeff Askins, Esq 18 Locus St Gallipolis, OH 45631

Lillian Ragusa 1825 76th Street Brooklyn, NY 11214 Mark E Sheets, Esq 19 Locust Street PO BOX 325 Gallipolis, OH 45631

Mountain State University PO BOX 9003 Beckley, WV 25802

Payment Monitoring Center PO BOX 2080 Chillicothe, OH 45601

Shapiro & Felty, LLP 1500 West Third St, Suite 400 Cleveland, OH 44113-1438

St Mary's Medical Center 2900 1st Ave PO BOX 3108 Huntington, WV 25702