

United States Bankruptcy Court
District of Oregon

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Lind, Wade, W.
Name of Joint Debtor (Spouse) (Last, First, Middle): Lind, Melissa, L.
All Other Names used by the Debtor in the last 8 years: Ten Redwoods, LLC; Sunset Hills Cemetery; Sunset Hills Memorial Gardens; Sunset Hills Crematorium; Sunset Hills Crematory; Sunset Hills Funeral Home
All Other Names used by the Joint Debtor in the last 8 years: Ten Redwoods, LLC; Sunset Hills Cemetery; Sunset Hills Memorial Gardens; Sunset Hills Crematorium; Sunset Hills Crematory; Sunset Hills Funeral Home
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN(if more than one, state all): 9433, Ten Redwoods, LLC: 68-0602198
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN(if more than one, state all): 7389, Ten Redwoods, LLC: 68-0602198
Street Address of Debtor (No. & Street, City, and State): 2605 Lawrence St. Eugene, OR
Street Address of Joint Debtor (No. & Street, City, and State): 2605 Lawrence St. Eugene, OR
ZIP CODE 97405
ZIP CODE 97405
County of Residence or of the Principal Place of Business: Lane
County of Residence or of the Principal Place of Business: Lane
Mailing Address of Debtor (if different from street address):
Mailing Address of Joint Debtor (if different from street address):
ZIP CODE
ZIP CODE

Location of Principal Assets of Business Debtor (if different from street address above): 4810 Willamette Street, Eugene, OR
ZIP CODE 97405

Type of Debtor (Form of Organization) (Check one box.)
Nature of Business (Check one box)
Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)
Nature of Debts (Check one box)
Filing Fee (Check one box)
Chapter 11 Debtors
Check one box:
Check if:
Check all applicable boxes

Filing Fee (Check one box)
Chapter 11 Debtors
Check one box:
Check if:
Check all applicable boxes

Statistical/Administrative Information
THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that funds will be available for distribution to unsecured creditors.
Estimated Number of Creditors
Estimated Assets
Estimated Liabilities

<b>Voluntary Petition</b> (This page must be completed and filed in every case)	Name of Debtor(s): <b>Wade W. Lind, Melissa L. Lind</b>
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**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet.)

Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;"><b>Exhibit A</b></p> <p>(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.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p><b>X Not Applicable</b></p> <p>Signature of Attorney for Debtor(s) _____ Date _____</p>
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**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(l)).

**Voluntary Petition**

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

Name of Debtor(s):

**Wade W. Lind, Melissa L. Lind**

**Signatures**

**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.

**s/ Wade W. Lind**

Signature of Debtor **Wade W. Lind**

**s/ Melissa L. Lind**

Signature of Joint Debtor **Melissa L. Lind**

Telephone Number (If not represented by attorney)

**9/3/2010**

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.)

I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**Not Applicable**

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

Date

**Signature of Attorney**

**s/ Wilson C. Muhlheim**

Signature of Attorney for Debtor(s)

**Wilson C. Muhlheim Bar No. #681114**

Printed Name of Attorney for Debtor(s) / Bar No.

**Muhlheim Boyd**

Firm Name

**88 East Broadway Eugene, OR 97401**

Address

**541-868-8005**

**541-868-8004**

Telephone Number

**9/3/2010**

Date

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

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(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.

**Not Applicable**

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.)

Address

**Not Applicable**

Date

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

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

If more than one person prepared this document, attach 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.*

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

**Not Applicable**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

In re ) Case No. \_\_\_\_\_

Wade W. Lind )

**EXHIBIT "C-1"**

Melissa L. Lind )

[NOTE: Must be FULLY completed by ALL debtors, and attached to ALL copies of the Petition.]

Debtor(s) )

(NOTE: You must answer ALL questions. Attach additional sheets if necessary. Use of "UNKNOWN" is NOT acceptable!)

1. DESCRIBE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION:

N/A

2. Street address and description of principal assets:

N/A

3. The BANKRUPTCY DOCUMENT PREPARER DECLARATION below has been completed for any person who helped, for compensation, prepare any of the bankruptcy papers if the debtor does not have an attorney.

I declare under penalty of perjury that the above information provided in this Exhibit "C" is true and correct.

DATE: 9/3/2010

s/ Wade W. Lind 541-338-8182

s/ Melissa L. Lind

Wade W. Lind

\_\_\_\_\_  
Melissa L. Lind

Debtor's Signature Phone #

Joint Debtor's Signature

**BANKRUPTCY DOCUMENT PREPARER DECLARATION**

I, the undersigned, declare under penalty of perjury that (1) neither I, nor anyone else listed herein, collected or received any payment from or on behalf of the debtor for court fees in connection with filing the petition; (2) I have received \$\_\_\_\_\_ from or on behalf of the debtor within the previous 12 month period; (3) \$\_\_\_\_\_ is the unpaid fee charged to the debtor; and (4) the following is true and accurate about myself and any other assistants:

Individual Name and Firm (Type or Print): Not Applicable

Address (Type or Print): \_\_\_\_\_

Last 4 digits of Social Security Number of all OTHER individuals who prepared or assisted in the preparation of these bankruptcy documents:

Signature: \_\_\_\_\_ Last 4 digits of Social Security #: \_\_\_\_\_ Phone #: \_\_\_\_\_

[NOTE: Penalties up to \$500 per item may be assessed for omission of any required information (11 USC §110; 18 USC §156) and Fed. Bankruptcy Rule 1006 prohibits further payment to any person for services until the court filing fees are paid in full.]

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT  
District of Oregon**

In re Wade W. Lind Melissa L. Lind  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**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 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 14 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 seven 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.]*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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, Exh. D) (12/09) – 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: **s/ Wade W. Lind**  
**Wade W. Lind**

Date: **9/3/2010**

Certificate Number: 00252-OR-CC-011963257



00252-OR-CC-011963257

## CERTIFICATE OF COUNSELING

I CERTIFY that on August 11, 2010, at 7:18 o'clock PM EDT, Wade Lind received from Institute for Financial Literacy, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Oregon, 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 and telephone.

Date: August 11, 2010 By: /s/Carlene Harper

Name: Carlene Harper

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).

B 1D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
District of Oregon

In re Wade W. Lind Melissa L. Lind
Debtor(s)

Case No.
(if known)

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.

[X] 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 14 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 seven 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.]

Three horizontal lines for signature or date.

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, Exh. D) (12/09) – 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: **s/ Melissa L. Lind**  
**Melissa L. Lind**

Date: **9/3/2010**

Certificate Number: 00252-OR-CC-011963270



00252-OR-CC-011963270

## CERTIFICATE OF COUNSELING

I CERTIFY that on August 11, 2010, at 7:20 o'clock PM EDT, Melissa Lind received from Institute for Financial Literacy, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Oregon, 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 and telephone.

Date: August 11, 2010 By: /s/Carlene Harper

Name: Carlene Harper

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).

**United States Bankruptcy Court  
District of Oregon**

In re Wade W. Lind Melissa L. Lind, Case No. \_\_\_\_\_  
Debtors Chapter 11

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
American Express POB 650448 Dallas TX 75265-0448	Attn: Accounts Receivable 800-472-9297 American Express PO Box 650448 Dallas TX 75265-0448	Credit card		<b>\$32,796.09</b>
Home Depot Credit Svcs POB 6925 The Lakes NV 88901-6925	Attn: Accounts Receivable 866-964-1263 Home Depot Credit Svcs POB 6925 The Lakes NV 88901-6925	Credit card		<b>\$26,027.94</b>
Capital One POB 60599 City of Industry CA 91736-0599	Attn: Accounts Receivable 800-867-0904 Capital One PO Box 60599 City of Industry, CA 91736-0599	Credit Card		<b>\$6,624.71</b>
Quiring Monuments, Inc. 9608 Aurora Avenue N. Seattle WA 98103-3296	Attn: Accounts Receivable 206-522-8400 Quiring Monuments, Inc. 9608 Aurora Avenue N. Seattle, WA 98103-3296	Business debt		<b>\$4,595.41</b>
Tami SP Beach Hult Plaza Suites 401 E. 10th Ave., Ste. 230 Eugene OR 97401	Tami SP Beach 541-338-8352 Tami SP Beach Hult Plaza Suites 401 E. 10th Ave., Ste. 230 Eugene, OR 97401	Legal Fees		<b>\$4,300.00</b>

B4 (Official Form 4) (12/07)4 -Cont.

In re Wade W. Lind Melissa L. Lind, Case No. \_\_\_\_\_  
 Debtors Chapter 11

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Advantage Precast, Inc. POB 21713 Keizer OR 97307	Attn: Accounts Receivable 503-390-2048 Advantage Precast, Inc. PO Box 21713 Keizer, OR 97307	Business debt		<b>\$4,019.76</b>
Dex Media West POB 79167 Phoenix AZ 85062-9167	Attn: Karen 763-971-7166 Dex Media West POB 79167 Phoenix AZ 85062-9167	Business debt		<b>\$3,685.32</b>
Guard Publishing POB 645 Eugene OR 97440-0645	Attn: Accounts Receivable 541-338-2232 Guard Publishing POB 645 Eugene OR 97440-0645	Business debt		<b>\$3,665.59</b>
Home Depot Credit Services CitiBank 8725 W. Sahara Blvd. Las Vegas NV 89117-5873	Attn: Accounts Receivable 866-458-7683 Home Depot Credit Services CitiBank 8725 W. Sahara Blvd. Las Vegas, NV 89117-5873	Credit card		<b>\$3,333.82</b>
Lane County Dept of Health & Human Svcs 125 E. 8th Street Eugene OR 97401	Attn: Accounts Receivable 541-682-4035 Lane County Dept of Health & Human Svcs 125 E. 8th Street Eugene, OR 97401	Business debt		<b>\$3,235.00</b>
Chase POB 94014 Palatine IL 60094-4014	Attn: Accounts Receivable unknown Chase PO Box 94014 Palatine, IL 60094-4014	Credit card		<b>\$2,869.15</b>

In re Wade W. Lind Melissa L. Lind, Case No. \_\_\_\_\_  
 Debtors Chapter 11

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Pierce Chemicals Royal Bond 4722 Bronz Way Dallas TX 75236-1997	Attn: Accounts Receivable 800-527-6419 Pierce Chemicals Royal Bond 4722 Bronz Way Dallas TX 75236-1997	Business debt		<b>\$2,585.62</b>
Ewing Irrigation Supplies 3441 E. Harbour Dr. Phoenix AZ 85034	Attn: Accounts Receivable 602-437-2598 Ewing Irrigation Supplies 3441 E. Harbour Dr. Phoenix AZ 85034	Business debt		<b>\$2,301.53</b>
Matthews Northwest AJ Distribution, Inc. POB 98868 Lakewood WA 98496	Attn: Accounts Receivable 800-426-6555 Matthews Northwest AJ Distribution, Inc. PO Box 98868 Lakewood, WA 98496	Business debt		<b>\$1,673.67</b>
YellowBook West POB 660052 Dallas TX 75266-0052	Attn: Accounts Receivable 800-242-5774 YellowBook West PO Box 660052 Dallas, TX 75266-0052	Business debt		<b>\$1,344.70</b>
Batesville Casket Company, Inc. POB 644559 Pittsburgh PA 15264-4559	Attn: Accounts Receivable 800-338-5951 Batesville Casket Company, Inc. PO Box 644559 Pittsburgh, PA 15264-4559	Business debt		<b>\$1,213.53</b>
DHS - Oregon Health Services Financial Recovery, PMR Unit POB 14260 Portland OR 97293-0260	Attn: Accounts Receivable 971-673-1253 DHS - Oregon Health Services Financial Recovery, PMR Unit PO Box 14260 Portland, OR 97293-0260	Business debt		<b>\$1,160.00</b>

B4 (Official Form 4) (12/07)4 -Cont.

In re Wade W. Lind Melissa L. Lind, Case No. \_\_\_\_\_  
 Debtors Chapter 11

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Sterling Furniture 3194 Gateway Loop Springfield OR 97477	Attn: Accounts Receivable 541-741-5136 Sterling Furniture 3194 Gateway Loop Springfield OR 97477	Business debt		<b>\$894.00</b>
Integra Telecom 1201 NE Lloyd Blvd., Suite 500 Portland OR 97232-1259	Attn: Accounts Receivable 503-953-7747 Integra Telecom 1201 NE Lloyd Blvd., Suite 500 Portland OR 97232-1259	Disputed business debt	<b>DISPUTED</b>	<b>\$756.13</b>
World Financial Network National Bank Ann Taylor POB 659705 San Antonio TX 78265-9705	Attn: Accounts Receivable 800-695-1788 World Financial Network National Bank Ann Taylor PO Box 659705 San Antonio, TX 78265-9705	Credit card		<b>\$701.00</b>

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

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Proposed Attorneys for Debtor in Possession

UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF OREGON

In re:

Wade W. Lind and Melissa L. Lind,  
Debtors.

Case No.

CERTIFICATE OF SERVICE OF LIST OF  
CREDITORS HOLDING 20 LARGEST  
UNSECURED CLAIMS

I hereby certify that on September 3, 2010, I served full and complete copies of the following:

1. List of Creditors Holding 20 Largest Unsecured Claims; and
2. Self-adhesive labels for the debtor, parties designated to perform the debtor's duties, debtor's attorney, and each creditor on the List of Creditors Holding 20 Largest Unsecured Claims.

by depositing in the United States mail at Eugene, Oregon, by first class mail, postage prepaid, addressed to the following:

Office of the U.S. Trustee  
Wayne L. Morse Courthouse  
405 East 8<sup>th</sup> Avenue, Suite 1100  
Eugene, OR 97401

DATED this 3<sup>rd</sup> day of September, 2010.

MUEHLHEIM BOYD

By: /s/ Wilson C. Muhlheim  
Wilson C. Muhlheim, OSB #681114  
Proposed Attorneys for Debtor in Possession