Official Form 1 (4/07)				I							
	States Bankruptcy Co n District of Pennsylvan			Voluntary Petition							
Name of Debtor (if individual, enter Last, First, Gigliotti, Alexander	Middle):	Name of Joint Debtor (Spouse) (Last, First, Middle): Gigliotti, Sherri Lyn									
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): FDBA Gigliotti Real Estate	years	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):									
Last four digits of Soc. Sec./Complete EIN or oth xxx-xx-1036	ner Tax ID No. (if more than one, state all)		our digits of Soc. Sec./Complete F x-xx-0814	EIN or other Tax ID No. (if more than one, state all)							
Street Address of Debtor (No. and Street, City, a 1530 Lancaster Avenue Rear Reading, PA	ZIP Code	153	Address of Joint Debtor (No. and 30 Lancaster Avenue Rea ading, PA	ZIP Code							
County of Residence or of the Principal Place of Berks	19607 Business:	Count <u></u> Bei	y of Residence or of the Principal	19607 I Place of Business:							
Mailing Address of Debtor (if different from stre	et address):	Mailin	g Address of Joint Debtor (if diff	ferent from street address):							
	ZIP Code			ZIP Code							
Location of Principal Assets of Business Debtor (if different from street address above):											
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 Output for the state of the s	Nature of Business (Check one box) Health Care Business Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank	ined	the Petition is Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13	 ruptcy Code Under Which s Filed (Check one box) Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding 							
Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Other Tax-Exempt Entity (Check box, if applicable) ☐ Debtor is a tax-exempt organiz under Title 26 of the United St Code (the Internal Revenue Co	states "incurred by an individual primarily for									
 Filing Fee (Check on Full Filing Fee attached Filing Fee to be paid in installments (applical attach signed application for the court's consi is unable to pay fee except in installments. R Filing Fee waiver requested (applicable to ch attach signed application for the court's consideration for the c	ble to individuals only). Must deration certifying that the debtor ule 1006(b). See Official Form 3A. apter 7 individuals only). Must	Check	Debtor is a small business debto Debtor is not a small business de if: Debtor's aggregate noncontinge to insiders or affiliates) are less t all applicable boxes: A plan is being filed with this po	etition. licited prepetition from one or more							
 Statistical/Administrative Information ■ Debtor estimates that funds will be available □ Debtor estimates that, after any exempt properties will be no funds available for distribution 	erty is excluded and administrative of			HIS SPACE IS FOR COURT USE ONLY							
Estimated Number of Creditors 1- 50- 100- 200- 49 99 199 999 □ ■ □ □ Estimated Assets □ □ □		5,001-),000	50,001- OVER 100,000 100,000								
■ \$0 to □ \$10,001 to \$10,000 \$100,000	\$100,001 to \$1 million \$1,000,0 \$100 mi		More than \$100 million								
Estimated Liabilities \$0 to \$50,000 \$50,000 \$100,000	\$100,001 to \$1 million \$1,000,0 \$100 mi		More than \$100 million								

10/04/07 1:19PM

Official Form	1 (4/07)	-	FORM B1, Page 2
Voluntary	y Petition	Name of Debtor(s): Gigliotti, Alexander	
(This page mu	st be completed and filed in every case)	Gigliotti, Sherri Lyn	
10	All Prior Bankruptcy Cases Filed Within Last		lditional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Per	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more that	n one, attach additional sheet)
Name of Debto - None -	Dr:	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A		chibit B
forms 10K and pursuant to S and is reques	leted if debtor is required to file periodic reports (e.g., nd 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petitioner named have informed the petitioner that [he of 12, or 13 of title 11, United States Co- under each such chapter. I further cert required by 11 U.S.C. §342(b).	l whose debts are primarily consumer debts.) d in the foregoing petition, declare that I or she] may proceed under chapter 7, 11, de, and have explained the relief available ify that I delivered to the debtor the notice
	A is attached and made a part of this petition.	X /s/ Joseph T. Bambrick, J Signature of Attorney for Debtor(s Joseph T. Bambrick, Jr.,) (Date)
	Exh	libit C	
	r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	e harm to public health or safety?
Exhibit I If this is a join	eted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made and nt petition:	a part of this petition.	a separate Exhibit D.)
Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition.	
	Information Regardin	-	
	(Check any ap Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for	al place of business, or principal asse	
	There is a bankruptcy case concerning debtor's affiliate, ge		
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defenda	nt in an action or
	Statement by a Debtor Who Resides (Check all app		У
	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, th permitted to cure the entire monetary default that gave rise possession was entered, and		
	Debtor has included in this petition the deposit with the co after the filing of the petition.	urt of any rent that would become du	e during the 30-day period

fficial Form 1 (4/07) V oluntary Petition	FORM B1, Page Name of Debtor(s):
foruntary retrion	Gigliotti, Alexander
This page must be completed and filed in every case)	Gigliotti, Sherri Lyn
	natures
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 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/ Alexander Gigliotti Signature of Debtor Alexander Gigliotti Signature of Joint Debtor Sherri Lyn Gigliotti	I declare under penalty of perjury that the information provided in this petitio 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 Coo Certified copies of the documents required by 11 U.S.C. §1515 are attached Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X Signature of Foreign Representative Date Signature of Non-Attorney Bankruptcy Petition Preparer
	I declare under penalty of perjury that: (1) I am a bankruptcy
Telephone Number (If not represented by attorney)	petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this
October 4, 2007	document for compensation and have provided the debtor with a copy of this document and the notices and information required
Date	under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or
Signature of Attorney	guidelines have been promulgated pursuant to 11 U.S.C. § 110(h)
Signutare of Fritoriney	setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum
🔏 /s/ Joseph T. Bambrick, Jr., Esq.	amount before preparing any document for filing for a debtor or
Signature of Attorney for Debtor(s)	accepting any fee from the debtor, as required in that section.
Joseph T. Bambrick, Jr., Esq. 45112	Official Form 19B is attached.
Printed Name of Attorney for Debtor(s)	
Joseph T. Bambrick, Jr., Esq.	Printed Name and title, if any, of Bankruptcy Petition Preparer
Firm Name	
529 Reading Avenue West Reading, PA 19611	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.)
Address	
Freelly not the Quant some	
Email: no1jtb@juno.com (610) 372-6400 Fax: (610) 372-9483	
Email: no1jtb@juno.com _(610) 372-6400 Fax: (610) 372-9483 Telephone Number	
(610) 372-6400 Fax: (610) 372-9483 Telephone Number	Address
(610) 372-6400 Fax: (610) 372-9483	
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date	Address X
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007	_ X
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in	X Date
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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	X Date Signature of Bankruptcy Petition Preparer or officer, principal,
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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.	X Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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,	X Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 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
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 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
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 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
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 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
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 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:
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 Printed Name of Authorized Individual	X 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 additional
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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	X 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 additional sheets conforming to the appropriate official form for each person.
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 Printed Name of Authorized Individual	X 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 additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the
(610) 372-6400 Fax: (610) 372-9483 Telephone Number October 4, 2007 Date 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 Printed Name of Authorized Individual	X 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 additional sheets conforming to the appropriate official form for each person.

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Eastern District of Pennsylvania

Alexander Gigliotti In re Sherri Lyn Gigliotti

Debtor(s)

Case No. 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*.

 \Box 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.

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_yn Gigliotti

Official Form 1, Exh. D (10/06) - 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.]

 \Box 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.);

 \Box 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/ Alexander Gigliotti
Alexander Gigliotti

Date: October 4, 2007

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Eastern District of Pennsylvania

Alexander Gigliotti In re Sherri Lyn Gigliotti

Debtor(s)

Case No. 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*.

 \Box 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.

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_yn Gigliotti

Official Form 1, Exh. D (10/06) - 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.]

 \Box 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.);

 \Box 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/ Sherri Lyn Gigliotti
Sherri Lyn Gigliotti

Date: October 4, 2007

United States Bankruptcy Court Eastern District of Pennsylvania

Alexander Gigliotti In re Sherri Lyn Gigliotti

Debtor(s)

Case No. 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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
American Express P O Box 360001 Fort Lauderdale, FL 33336	American Express P O Box 360001 Fort Lauderdale, FL 33336	Credit Card Purchases		31,042.26
Berks Earned Income Tax Bureau 920 Van Reed Road Wyomissing, PA 19610	Berks Earned Income Tax Bureau 920 Van Reed Road Wyomissing, PA 19610	Past Due Tax		35,975.01
Citizens Bank of Pennsylvania 3025 Chemical Road Suite 240 Plymouth Meeting, PA 19462	Citizens Bank of Pennsylvania 3025 Chemical Road Suite 240 Plymouth Meeting, PA 19462	Misc		30,117.70
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		36,956.94
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		33,137.39
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		74,026.67
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		58,757.94

Debtor(s)

Case No.

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LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		44,015.01
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		37,669.52
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		26,198.35
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		19,647.04
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		18,344.16
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		15,054.03
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051	Internal Revenue Service Special Procedures Branch Insolvency Unit 1 Philadelphia, PA 19105-2051	Past Due Taxes		13,756.92
Loomis Company Park Road Wyomissing, PA 19610	Loomis Company Park Road Wyomissing, PA 19610	Past Due Insurance		19,310.00
Pramco CV6LLC 6894 Pittsford Palmyra Road 230 Crosskeys Office Park Fairport, NY 14450	Pramco CV6LLC 6894 Pittsford Palmyra Road 230 Crosskeys Office Park Fairport, NY 14450	Misc		115,337.20 (0.00 secured)
Rose Corporation P O Box 12586 Reading, PA 19612	Rose Corporation P O Box 12586 Reading, PA 19612	Misc. Purchases		25,534.16

Debtor(s)

Case No.

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
The Loomis Company Richard Guida 1100 Berkshire Blvd Suite 201 Reading, PA 19610	The Loomis Company Richard Guida 1100 Berkshire Blvd Suite 201 Reading, PA 19610	Misc		19,310.00
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602	UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602	Past Due Taxes Unemployment Compensation		22,777.89
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602	UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602	Past Due Taxes Employer Payroll Tax		14,156.35

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

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

Date October 4, 2007

Signature /s/ Alexander Gigliotti
Alexander Gigliotti

Debtor

Date October 4, 2007

Signature /s/ Sherri Lyn Gigliotti Sherri Lyn Gigliotti Joint 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	Alexander Gigliotti,	Case No
	Sherri Lyn Gigliotti	

Debtors

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.

other security interests. List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in 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" 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" 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. п 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.)	C O D E B T O R	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONT - NGEN		D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Docket #04 659 Pramco CV6LLC 6894 Pittsford Palmyra Road 230 Crosskeys Office Park Fairport, NY 14450		J	Misc	_ ⊤	DATED			
	┢		Value \$ 0.00				115,337.20	115,337.20
Account No. Representing: Pramco CV6LLC			Citizens Bank of PA William Levant, Esquire Union Mtg Corporate Center 910 Harvest Dr. Blue Bell, PA 19422 Value \$					
Account No. Representing: Pramco CV6LLC			Value \$ Commonwealth Bank William Colby Jr, Esquire 501 Washington Street Reading, PA 19603					
			Value \$	-				
Account No.								
			Value \$					
0 continuation sheets attached			(Total of	Sub this			115,337.20	115,337.20
			(Report on Summary of S	-	Tota lule	-	115,337.20	115,337.20

In re	Alexander Gigliotti,	Case No
	Sherri Lyn Gigliotti	

Debtors

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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in 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 "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 who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not 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 who file a case under chapter 7 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 trust 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 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.

10 continuation sheets attached

In re Alexander Gigliotti,

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7
	C O	но	sband, Wife, Joint, or Community	C O	U	DI		AMOUNT NOT
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	0 Z H – Z G H Z	U N L L Q U L D A	S P U T E	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUN ENTITLED T PRIORIT
Account No. Cumru 39			2004	Ť	DATED			
Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601		J	Past Due Taxes		D		4,227.17	0.00
Account No.							-,	
Representing: Berks County Tax Claim Bureau			Kathleen Sonnen, Tax Collector Cumru Toship 1775 Welsh Road Mohnton, PA 19540					
Account No. Cumru 39			2005					
Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601		J	Past Due Taxes					0.00
Account No.	_					$\left \right $	4,764.13	4,764.13
Representing: Berks County Tax Claim Bureau			Kathleen Sonnen, Tax Collector Cumru Toship 1775 Welsh Road Mohnton, PA 19540					
Account No. Cumru 39			2006	\vdash				
Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601		J	Past Due Taxes					0.00
							4,995.44	4,995.44
Sheet <u>1</u> of <u>10</u> continuation sheets a	attache	d to	s S	ubt	ota	1	-	0.00
sheet of continuation sheets a	anache	u ic				、 		

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

13,986.74

13,986.74

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

							TYPE OF PRIORITY	7
CREDITOR'S NAME, AND MAILING ADDRESS	C O D E B T	н н		C O N T	U N L I	D I S P	AMOUNT	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	B T O R	C J M	AND CONSIDERATION FOR CLAIM	I NGEN	Q U I	U T E	OF CLAIM	AMOUN ENTITLED TO PRIORITY
Account No.			Kathleen Sonnen, Tax Collector	T	D A T E D			
Representing: Berks County Tax Claim Bureau			Cumru Toship 1775 Welsh Road Mohnton, PA 19540					
Account No. Kenhorst 54		╞	2005	┢	\vdash			
Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601		J	Past Due Taxes					0.00
							3,950.52	3,950.52
Account No.			Richard L. Fritz, Tax Collector					
Representing: Berks County Tax Claim Bureau			Borough of Kenorst 339 S. Kenhorst Blvd Reading, PA 19607					
Account No. Kenhorst 54			2006					
Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601		J	Past Due Taxes					0.00
Reading, FA 19001							6,680.39	6,680.39
Account No.			Richard L. Fritz, Tax Collector					
Representing: Berks County Tax Claim Bureau			Borough of Kenorst 339 S. Kenhorst Blvd Reading, PA 19607					
Sheet 2 of 10 continuation sheets	attache	d te		Sub	l tota	1 1		0.00
Schedule of Creditors Holding Unsecured				his	pag	ge)	10,630.91	10,630.91

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7	
ODEDITOD'S NAME	C O	Hu	sband, Wife, Joint, or Community	c	U N	D		AMOU	NT NOT
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	L L L L L	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM			I S P U T E D	AMOUNT OF CLAIM	ENTITI PRIORI	AMOUNT TY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No.			1997 Q2 through 2001 4Q	Ť	A T E D				
Berks Earned Income Tax Bureau 920 Van Reed Road Wyomissing, PA 19610		н	Past Due Tax				05 075 0 <i>4</i>	0.00	
Account No.	_		12/31/95	-			35,975.01		35,975.01
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes					0.00	
							153.00		153.00
Account No. Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	06/30/97 Past Due Taxes				58,757.94	0.00	58,757.94
Account No.			09/30/97						,
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				37,669.52	0.00	37,669.52
Account No.	+		12/31/97	+			51,003.32		57,003.JZ
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				74,026.67	0.00	74,026.67
Sheet 3 of 10 continuation sheets a	ttache	d to)	Sub	ota	1	-	0.00	
Schedule of Creditors Holding Unsecured P				his	pag	e)	206,582.14		206,582.14

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7	
	C O	Hu	sband, Wife, Joint, or Community	c	U N	D		AMOU	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	L L L L L	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	ONT I NGEN		I S P U T E D	AMOUNT OF CLAIM	ENTITI PRIORI	AMOUNT AMOUNT ENTITLED TO PRIORITY
Account No.			12/31/97	Τ	A T E D				
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes		D		1,631.43	0.00	1,631.43
Account No.			12/31/96						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia BA 10105 2051		J	Past Due Taxes					0.00	
Philadelphia, PA 19105-2051							10,604.94		10,604.94
Account No.			12/31/98						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		J	Past Due Taxes				178.44	0.00	178.44
Account No.			12/31/99	\vdash					-
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		J	Past Due Taxes				6,850.18	0.00	6,850.18
Account No.		╞	3/31/99	\vdash			-,		- ,
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		w	Past Due Taxes				13,756.92	0.00	13,756.92
Sheet _4 of _10 continuation sheets a	ttache	d to	<u>1</u>	Subt	ota	1		0.00	
Schedule of Creditors Holding Unsecured F				his _l	pag	e)	33,021.91		33,021.91

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7	
	C O	Ни	isband, Wife, Joint, or Community	c	U	D		AMOU	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	H W J C	DATE CLAIM WAS INCURRED		UNLLQULDAT	S P	AMOUNT OF CLAIM	ENTIT	NT NOT LED TO ITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No.			06/30/99	Ť	T E D				
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		w	Past Due Taxes				19,647.04	0.00	19,647.04
Account No.			09/30/99						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051		w	Past Due Taxes					0.00	
Philadelphia, PA 19105-2051							13,383.30		13,383.30
Account No.			06/30/2001						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		w	Past Due Taxes				104.90	0.00	104.90
Account No.			09/30/01						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		w	Past Due Taxes					0.00	
Account No.			12/31/01	+		$\left \right $	33,137.39		33,137.39
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		w	Past Due Taxes				44,015.01	0.00	44,015.01
Sheet 5 of 10 continuation sheets	otto ch -	4.4	l	Subt	L tota	1		0.00	++,010.01
Schedule of Creditors Holding Unsecured				this	pag	e)	110,287.64		110,287.64

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7	
	C O	Hu	isband, Wife, Joint, or Community	C O	U	D I		AMOU	NT NOT
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	H V H	DATE CLAIM WAS INCURRED	ONT I NGEN	U Z L L Q D L D <	I S P U T E D	AMOUNT OF CLAIM	ENTITI PRIORI	AMOUNT AMOUNT ENTITLED TO PRIORITY
Account No.			03/31/99	Ť	A T E D				
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes		D		18,344.16	0.00	18,344.16
Account No.			06/30/99						
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes					0.00	
							26,198.35		26,198.35
Account No. Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	12/31/01 Past Due Taxes				36,956.94	0.00	36,956.94
Account No.			03/31/03						,
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				5,923.68	0.00	5,923.68
Account No.	┥	\vdash	06/30/03	╞	-	\square	-,		,
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				5,342.11	0.00	5,342.11
Sheet 6 of 10 continuation sheets a	ttache	d to))	Subt	ota	1	-	0.00	
Schedule of Creditors Holding Unsecured P				his	pag	e)	92,765.24		92,765.24

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

						,	TYPE OF PRIORITY	7
	C O	Hu	sband, Wife, Joint, or Community	C O	U N	D I		AMOUNT NOT
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	L L L L L	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	0 N H – N G E N	1-00-D	I S P U T E D	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No.			09/30/03	Ť	A T E D			
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				5,624.32	0.00 5,624.32
Account No.			03/31/04					
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes					0.00
							4,568.40	4,568.40
Account No. Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	06/30/04 Past Due Taxes				4,949.10	0.00
Account No.			09/30/05				,	,
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				4,560.80	0.00
Account No.			12/31/05				-	
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				4,557.32	0.00
Sheet 7 of 10 continuation sheets a	ttache	d to		Subt	ota	1		0.00
Schedule of Creditors Holding Unsecured F				his j	pag	e)	24,259.94	24,259.94

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY										
	C O	Hu	sband, Wife, Joint, or Community	C O	U N	D		AMOUN	IT NOT	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	O D E B T O R	H J C	DATE CLAIM WAS INCURRED	O N T I N G E N	1-00-D	I SPUTED	AMOUNT OF CLAIM	ENTITL PRIORI	AT NOT ED TO IY, IF ANY AMOUNT ENTITLED TO PRIORITY	
Account No.			12/31/04	Ť	A T E D					
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes				5,915.83	0.00	5,915.83	
Account No.			12/31/04							
Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	Past Due Taxes					0.00		
							13,235.97		13,235.97	
Account No. Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051		н	09/30/04 Past Due Taxes				15,054.03	0.00	15,054.03	
Account No. Cumru 39			2007	\vdash			10,004.00		13,034.03	
Kathleen Sonnen, Tax Collector Cumru Toship 1775 Welsh Road Mohnton, PA 19540		J	Past Due Taxes				4 984 92	0.00	4 984 92	
Account No. ***-**-1036 and ***-**-0814	╉─	-	1999	\vdash		$\left \right $	4,984.92		4,984.92	
Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496		J	Past Due Taxes				2,032.75	0.00	2,032.75	
Sheet 8 of 10 continuation sheets atta	che	d to)	Subt	ota	1		0.00		
Schedule of Creditors Holding Unsecured Prio				his j	pag	e)	41,223.50		41,223.50	

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

							TYPE OF PRIORITY	7
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H V J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONT-NGEN		S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No. 2003 - 2004 Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptev Division			Past Due Payroll Taxes	T	A T E D			0.00
Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496		н					8,229.90	8,229.90
Account No. Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496		н	04/01/04-06/30/04 Past Due Taxes					0.00
Account No. Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496		н	01/15/04-03/31/04 Past Due Taxes				953.78 738.00	953.78 0.00 738.00
Account No. Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496		н	10/01/03-12/31/03 Past Due Taxes				765.44	0.00
Account No. Kenhorst 54 Richard L. Fritz, Tax Collector Borough of Kenorst 339 S. Kenhorst Blvd Reading, PA 19607		J	2007 Past Due Taxes				6,534.24	0.00 6,534.24
Sheet <u>9</u> of <u>10</u> continuation sheets atta Schedule of Creditors Holding Unsecured Prio				ubt nis p			17,221.36	0.00 17,221.36

Sherri Lyn Gigliotti

Case No.

Debtors SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

							TYPE OF PRIORITY	7	
	С	но	sband, Wife, Joint, or Community	C O	U				
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED	ONT I NGEN	UNLIQUIDA	I SPUTED	AMOUNT OF CLAIM	ENTIT	NT NOT LED TO ITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No. 6-421385			2003 Q1 - 2004 Q3	Т	D A T E D				
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602		н	Past Due Taxes Employer Payroll Tax				14,156.35	0.00	14,156.35
Account No. 6-421385			2005 Q1 - Q2				14,100.00		14,100.00
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602		J	Past Due Taxes					0.00	
							477.58		477.58
Account No. 6-421385			2002 Q1 - 2003 Q4						
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602		н	Past Due Taxes Payroll Tax					0.00	
							7,796.35		7,796.35
Account No. 6-412385			2002 Q1 - 2004 Q3						
UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602		н	Past Due Taxes Unemployment Compensation					0.00	
							22,777.89		22,777.89
Account No.									
Sheet 10 of 10 continuation sheets at	tache	d to)	ubt				0.00	
Schedule of Creditors Holding Unsecured Pr				nis j	pag	ge)	45,208.17		45,208.17
					ota		FOF 407 FF	0.00	EDE 407 EE
(Report on Summary of Schedules) 595,187.55 595,187.55									

In re	Alexander Gigliotti,	Case No.
	Sherri Lyn Gigliotti	

Debtors

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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in 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 filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

 \Box Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			S P U T E	AMOUNT OF CLAIM
Account No. American Express P O Box 360001 Fort Lauderdale, FL 33336		w	2007 Credit Card Purchases	T	A T E D		31,042.26
Account No. APS Wireless 900 Airport Road West Chester, PA 19380		J	2/7/2005 Past Due Utility				1,074.80
Account No. 4264-2931-4402-8317 Bank of America Visa P O Box 15721 Wilmington, DE 19886		w	2007 Credit Card Purchases				5,535.76
Account No. 37767 Berks ENT Surgical Associates 1 Granite Point Drive Suite 300 Reading, PA 19610		J	Medical Bill				132.55
18 continuation sheets attached			(Total o	Sub			37,785.37

(Total of this page)

In re Alexander Gigliotti,

Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

						1.5	i
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	band, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			D I S P U T E D	AMOUNT OF CLAIM
Account No.			Accounts Recovery Bureau	'	ED		
Representing: Berks ENT Surgical Associates			P O Box 6768 Wyomissing, PA 19610				
Account No.			9/26/2005 Services Rendered			╞	
BOC Gases, Inc. 575 Mountain Ave. Murray Hill, NJ 07974		J					5,224.24
Account No.			Morris & Adelman, PC				
Representing: BOC Gases, Inc.			1920 Chestnut Street P O Box 30477 Philadelphia, PA 19103				
Account No. LANC1530R			2007 Deet Due Utility Server				
Borough of Kenhorst 339 S. Kenhorst Blvd Kenhorst, PA 19607		J	Past Due Utility - Sewer				
							1,585.31
Account No. Docket #06 8594			Misc				
Borough of Kenhorst Accounts Recovery Bureau 1136 Penn Avenue Reading, PA 19610		н					
····· 5,······							461.20
Sheet no. <u>1</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sut this			7,270.75

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. Representing: Borough of Kenhorst	CODEBTOR	H H W J C	CONSIDERATION FOR CLAIM. IF CLAIM	 CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. 5307-5821-5176-0614 Capital One P.O. Box 85184 Richmond, VA 23285		н	Credit Card				661.73
Account No. Representing: Capital One			Arrow Financial Services 5996 W Touhy Avenue Niles, IL 60714				
Account No. Representing: Capital One			Associates Recovery Systems 201 West Grand Avenue Escondido, CA 92025				
Account No. Representing: Capital One			CCB Credit Services, Inc. 1045 Outer Park Drive Springfield, IL 62704				
Sheet no. 2 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	ıbtc is p			661.73

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		-			-		-	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HI V J C	CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	D AIM 3.			D I S P U T E D	AMOUNT OF CLAIM
Account No.			Law Offices of Gerald E. Moore		'	T E D		
Representing: Capital One			P.O. Box 724087 Atlanta, GA 31139					
Account No.			National Asset Management		_		-	
Representing: Capital One			Enterprises In P.O. Box 724747 Atlanta, GA 31139					
Account No. 4121-7414-0392-3944			Credit Card					
Capital One P O Box 5155 Norcross, GA 30091		н						1,152.67
Account No.			Capital Management Services, LP					
Representing: Capital One			726 Exchange Street, Suite 700 Buffalo, NY 14210					
Account No. Representing: Capital One			FMS INC 4915 South Union Avenue Tulsa, OK 74107					
Sheet no. <u>3</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(T	S otal of th		tota pag		1,152.67

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1.0	1.						
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C H H	CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	LAIM		UNLLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No.	1		NCO Financial Systems Inc.		'	E D		
Representing: Capital One			507 Prudential Road Horsham, PA 19044					
Account No.		t	Plaza Associates					
Representing: Capital One			P.O. Box 18008 Hauppauge, NY 11788					
Account No. Docket #04 656		T	Misc					
Citizens Bank of Pennsylvania 3025 Chemical Road Suite 240 Plymouth Meeting, PA 19462		J						30,117.70
Account No.		T	NCO Financial Systems, Inc.					
Representing: Citizens Bank of Pennsylvania			507 Prudential Road Horsham, PA 19044					
Account No.	┢	\uparrow	RJM Acquisitions LLC					
Representing: Citizens Bank of Pennsylvania			P O Box 18006 Hauppauge, NY 11788					
Sheet no. <u>4</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			. ("	S Total of th		tota pag		30,117.70

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	_	-			-	_	· · · · · · · · · · · · · · · · · · ·
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N	U N L I Q U I D A	D I S P U T E D	AMOUNT OF CLAIM
Account No.			Universal Fidelity Corporation	Т	T E D		
Representing: Citizens Bank of Pennsylvania			P O Box 941911 Houston, TX 77094		D		
Account No.		\vdash	William Colby Jr. Esquire	-	+		
Representing: Citizens Bank of Pennsylvania			501 Washington Street Reading, PA 19603				
Account No. W54530617104874		\square	2007				
City of Reading Reading Area Water Authority 815 Washington Street Reading, PA 19601		J	Past Due Utility				2,444.34
Account No. 05818522120049			Past Due Utility	+	\uparrow		
Comcast P O Box 3006 Southeastern, PA 19398		J					119.42
Account No. 7836007	┢	\vdash	Misc	+	╀		
Community Banks P.O. Box 580 1060 Main Street Blue Ball, PA 17506		J					558.73
Sheet no. <u>5</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			3,122.49

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	-	_			-	-	-	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	IM	CONTINGENT	UNLLQULDAT	D I S P U T E D	AMOUNT OF CLAIM
Account No. Representing:			Global Recovery Services CCA, 7805 Hudson Road, Suite 100		'	E D		
Community Banks			Saint Paul, MN 55125					
Account No.			Global Recovery Services India					
Representing: Community Banks			Private L Dept 9500 Los Angeles, CA 90084					
Account No. 5436-6810-0936-5990			2007 Credit Card Purchases					
CorTrust Bank P O Box 5431 Sioux Falls, SD 57117		J	Credit Card Furchases					305.06
Account No.			2007					
Davis Steel Detailing 61 Lindy Lane Boyertown, PA 19512		J	Services Rendered					4,256.93
Account No.			Bush & Kennedy					4,200.00
Representing: Davis Steel Detailing			4336 North Blvd. Suite 204 Baton Rouge, LA 70806					
Sheet no. <u>6</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	S otal of th		tota pag		4,561.99

In re Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

					-	_	1
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				AMOUNT OF CLAIM
Account No. 6011-0024-1006-6666			2007	T	E		
Discover P O Box 15251 Wilmington, DE 19886		J	Credit Card Purchases			,	6,884.82
Account No. Docket # 01-8622			Misc	+	+	+	
Duron Inc 10406 Tucker Street Beltsville, MD 20705-2201		н					
							6,130.10
Account No. Representing: Duron Inc	-		Commonwealth Bank William Colbym Jr. 501 Washington Street Reading, PA 19603				
Account No.			Jay Pressman, Esquire 1060 Andrew Drive Suite 170 West Chester, PA 19380				
Representing: Duron Inc			West Chester, FA 15500				
Account No. 334491792			2007 Credit Card Purchases				
Express WFNNB Bankruptcy Dept. P O Box 182125 Columbus, OH 43218-2125		w					
							0.00
Sheet no. <u>7</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	Sut f this			13,014.92

Creditors Holding Unsecured Nonpriority Claims

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In re Alexander Gigliotti,

Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 0000330315 Express Scripts, Inc. P O Box 66580 Saint Louis, MO 63166		Hu: H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAII IS SUBJECT TO SETOFF, SO STATE. 9/19/2005 Services Rendered	Л	CONTINGENT	U N L I Q U I D A T E D	DISPUTED	AMOUNT OF CLAIM
Account No. Representing: Express Scripts, Inc.	-		Transworld Systems, Inc. 460 Norristown Road #100 Blue Bell, PA 19422					60.00
Account No. Fastenal 103 Lancaster Avenue Reading, PA 19611		J	7/26/2006 Misc. Purchases					7,731.52
Account No. Representing: Fastenal			James, Stevens, & Daniels 1283 College Park Drive Dover, DE 19904					
Account No. Representing: Fastenal			Stuart D. Kennedy 441 Morgantown Road Reading, PA 19611					
Sheet no. 8 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Tota	S I of th		tota pag		7,791.52

In re Alexander Gigliotti,

Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UNLLQULDATED D I S P CODEBTOR CONTINGENT CREDITOR'S NAME, AND MAILING ADDRESS н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE. w UTED CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J C AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. 5178-0077-0244-4944 2007 **Credit Card Purchases First Premier Bank** J P O Box 5524 Sioux Falls, SD 57117 150.68 2007 Account No. 6018595091050753 **Credit Card Purchases** GAP W **GE Money Bank** Attn: Bankruptcy Department P O Box 103104 Roswell, GA 30076 220.16 Account No. 10/28/2004 Services Rendered George S. May Int. & Co. J 303 Northwest Hwy Park Ridge, IL 60068-4255 4,120.47 Morris & Adelman, PC Account No. **1920 Chestnut Street** P O Box 30477 **Representing:** Philadelphia, PA 19103 George S. May Int. & Co. Account No. Nickolaou, Michaels & Evans LTD 7503 W 56th St Summit, IL 60501 **Representing:** George S. May Int. & Co. Subtotal

Sheet no. 9 of 18 sheets attached to Schedule of

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

4.491.31

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

					1	1~	1
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN		D I S P U T E D	AMOUNT OF CLAIM
Account No.			Teller & Levit Silvertrust, PC	T	T E D		
Representing:			11 E Adams St.			+	4
George S. May Int. & Co.			Chicago, IL 60603				
Account No.			2007 Services Rendered				
HCI Decking	1						
P O Box 88		J					
Neffs, PA 18065							
							1,903.40
Account No.			Alan R. Mege, Esq.				
Representing:	1		70 East Broad Street				
HCI Decking			Bethlehem, PA 18016				
Account No.			Hon. James F. Stocklas 402 E. Broad Street				
Representing.	1		Bethlehem, PA 18018				
Representing: HCI Decking							
Account No.			2007 Services Rendered				
Herbein & Co.							
2763 Century Blvd	1	J					
Reading, PA 19610	1						
-	1						
	1						7,038.50
Sheet no. <u>10</u> of <u>18</u> sheets attached to Schedule of	4		1	Sub	otot	al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				8,941.90
creaters froming enseened frompriority chamis			(10/// 0/		Pu	50)	

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		1.		1.6	1	-	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hi W J C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	UNLIQUIDAT	D I S P U T E D	AMOUNT OF CLAIM
Account No. Representing:			Alfred W. Crump, Jr., Esq. 520 Washington St. P O Box 1496	Т	T E D		
Herbein & Co.			Reading, PA 19603				
Account No. 5406-3300-1504-9745			2007 Credit Card Purchases				
HSBC Gold Mastercard P O Box 81622 Salinas, CA 93912		J					
							259.85
Account No. 5155-9700-1324-5143			2007 Credit Card Purchases				
HSBC Platinum MC P O Box 80084 Salinas, CA 93912		J					
Account No. 2007			Past Due Utility (trash)				350.62
JD's Trash Service 264 Bartlett Street Reading, PA 19611		J					
							356.25
Account No. 8904-004M Leisawitz Heller 2755 Century Blvd		J	12/27/06 Services Rendered				
Wyomissing, PA 19610							252.00
Sheet no 11 _ of _ 18 _ sheets attached to Schedule of				Sub			232.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				1,218.72

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	С	Hu	sband, Wife, Joint, or Community	C	; L	J	D	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				I S P U T E D	AMOUNT OF CLAIM
Account No.			11/4/2005	Ť			Ī	
Loomis Company Park Road Wyomissing, PA 19610		J	Past Due Insurance		C	>		19,310.00
Account No. 2F069807			2/11/06		+	+		
MCI Residential Service P O Box 105271 Atlanta, GA 30348-5271		J	Past Due Utility					
								172.81
Account No. 100013759723 Met-Ed P O Box 3687 Akron, OH 44309		J	2007 Past Due Utility					
								3,825.14
Account No. 4185-3401-0303-1471 Plains Commerce Visa P O Box 88020 Sioux Falls, SD 57109		J	2007 Credit Card Purchases					
								497.05
Account No. Proserpi Schlecter Ctr for Plastic Surge 2603 Keiser Blvd Suite 207 Wyomissing, PA 19610		J	2007 Medical Bill					794.00
Sheet no. <u>12</u> of <u>18</u> sheets attached to Schedule of	-	1		Sul				24,599.00
Creditors Holding Unsecured Nonpriority Claims			(Total o	of this	ра	ige)	24,000.00

Alexander Gigliotti, Sherri Lyn Gigliotti

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	AIM		U Z L L Q U L D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. W54530617104874 Reading Area Water Authority 815 Washington Street Anthony Consentino Reading, PA 19601		J	Past Due Utility		Т	T E D		995.07
Account No. Representing: Reading Area Water Authority			Accounts Recovery Bureau P O Box 6768 Wyomissing, PA 19610					
Account No. Representing: Reading Area Water Authority			District Justice Wally Scott 101 North 9th Street Reading, PA 19601					
Account No. Rose Corporation P O Box 12586 Reading, PA 19612		J	2007 Misc. Purchases					25,534.16
Account No. Representing: Rose Corporation			C2C Resources, LLC 56 Perimiter Center East Atlanta, GA 30346					20,004.10
Sheet no. 13 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		1	Γ)	Sotal of t		tota pag		26,529.23

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	6				_		-	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED ANE CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE) IM	CONHLNGUN		DISPUTED	AMOUNT OF CLAIM
Account No.			Strahn Law Offices 534 Perkiomen Avenue		I	T E D		
Representing: Rose Corporation			Reading, PA 19606					
Account No. 4146-8300-0177-9641 Salute P O Box 105555 Atlanta, GA 30348		J	2007 Credit Card Purchases					
								273.10
Account No. 5049-9480-2687-7011 Sears Card P O Box 183081 Columbus, OH 43218-3081		w	2007 Credit Card Purchases					0.00
Account No. 0074460242 5# Sprint PCS P.O. Box 62012 Baltimore, MD 21264		н	Misc					
Account No. Representing: Sprint PCS			Allied Interstate 800 Interchange West 435 Ford Road Minneapolis, MN 55426-1096					243.29
Sheet no. <u>14</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	Su tal of th		ota pag		516.39

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		_				_	i
CREDITOR'S NAME,	CODEBTOR	Hu	sband, Wife, Joint, or Community			D I S P U T E	
AND MAILING ADDRESS	DF	н	DATE CLAIM WAS INCURRED AND	N	! L	S	
INCLUDING ZIP CODE,	B	w	CONSIDERATION FOR CLAIM. IF CLAIM	- Li	ļ	Ų	
AND ACCOUNT NUMBER	0	J C	IS SUBJECT TO SETOFF, SO STATE.	G		Ë	AMOUNT OF CLAIM
(See instructions above.)	R	ľ				D	
Account No.			Collectech Systems	Ť	T		
Representing:	1		P.O. Box 4157		Ë D		
Sprint PCS			Woodland Hills, CA 91365				
Sprint POS							
Account No.			Debt Recovery Solutions, LLC.				
Donne contin au	1		P.O. Box 9001				
Representing:			Westbury, NY 11590				
Sprint PCS							
Account No. 4352-3717-2442-9379	┢		2007	\top	╈	+	
			Credit Card Purchases				
Target Visa							
Target National Bank		w					
P O Box 5330							
Sioux Falls, SD 57117							
							0.00
			0/00/05		_		0.00
Account No. 004625080318			9/26/05				
			Medical Bill				
Tatyana Ehlikh, MD		Ι.					
Reading Hospital and Medical Center		J					
P O Box 12872							
Philadelphia, PA 19176							
							411.28
Account No. Docket # 05 309	┢	-	Misc		+	+	
	1						
The Loomis Company	L						
Richard Guida	L	J					
1100 Berkshire Blvd Suite 201	L	ľ					
	L						
Reading, PA 19610	L						
							19,310.00
Sheet no. <u>15</u> of <u>18</u> sheets attached to Schedule of	-			Sut	otot	al	
Creditors Holding Unsecured Nonpriority Claims			(Total o				19,721.28
Creations notating Unsecured Nonpriority Claims			(10tal 0.	uns	pa	ge)	

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	6				6			
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATH	D AIM E.	CONTINGENT	UNLIQUIDAT	D I S P UT E D	AMOUNT OF CLAIM
Account No. 5565090064			4/27/2004		Т	T E D		
The Reading Hospital and Medical Center P O Box 14683 Reading, PA 19612-4683		н	Medical Bill Services provided to Angela T. Gigliotti Responsible: Alexander Gigliotti			D		250.00
Account No. 00264728080148			2007					
The Reading Hospital and Medical Center P O Box 14683 Reading, PA 19612-4683		w	Medical Bill					82.00
Account No.	╉─┤		Accounts Recovery Bureau			┝	\square	
Representing: The Reading Hospital and Medical Center			P O Box 6768 Wyomissing, PA 19610					
Account No. 4625080296			Medical Bill					
The Reading Hospital and Medical Center P O Box 14683 Reading, PA 19612-4683		J						95.64
Account No.	╉─		Accounts Recovery Bureau					
Representing: The Reading Hospital and Medical Center			P O Box 6768 Wyomissing, PA 19610					
Sheet no. <u>16</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				S otal of th		tota pag		427.64

Alexander Gigliotti, Sherri Lyn Gigliotti

Case No._____

Debtors SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

r	-	-						i
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C H	CONSIDERATION FOR CLAIM. IF IS SUBJECT TO SETOFF, SO S	F CLAIM	CONTINGENT	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No.			Computer Credit Inc.			E D		
Representing: The Reading Hospital and Medical Center			Claim Dept 072500 640 West Fourth St P O Box 5238 Winston Salem, NC 27113-5238					
Account No. 004625080300		T	7/26/05					
Toso Igianfranco, MD Reading Hospital & Medical Center P O Box 12872 Philadelphia, PA 19176		J	Medical Bill					269.29
Account No. 702738304126			2007					
UGI Utilities Inc. P O Box 13009 Reading, PA 19612		J	Past Due Utility					117.16
Account No. 201529448-0001	┢	\vdash	11/2006				┢	
Verizon Wireless Bankruptcy Department P O Box 3397 Bloomington, IL 61702		J	Past Due Utility					102.93
Account No.	┢	\vdash	Progressive Managemet Systems		\vdash		╞	
Representing: Verizon Wireless Bankruptcy Department			1521 West Caneron Ave P O Box 2220 West Covina, CA 91793-9917					
Sheet no. <u>17</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				S (Total of th		ota pag		489.38

Alexander Gigliotti, In re

Sherri Lyn Gigliotti

Case No.

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		_					.
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H J C	ISBAND, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			D I S P U T E D	AMOUNT OF CLAIM
Account No.			Verizon Wireless	Ť	Τ		
Representing: Verizon Wireless Bankruptcy Department			P O Box 17120 Tucson, AZ 85731		E		
Account No. 3551548-0-4 Victoria Insurance P O Box 6238 Cleveland, OH 44101		J	1/4/07 Past Due Insurance				
							118.99
Account No. 269080214 Victoria's Secret WFNNB Bankruptcy Dept. P O Box 182125 Columbus, OH 43218-2125		w	2007 Credit Card Purchases				0.00
Account No. 081014219521941-A			Misc	+	+		
Wachovia Bank 1 Wachovia Center Charlotte, NC 28288		J					102.31
Account No.			Law Offices of Mitchell N. Kay 7 Penn Plaza				
Representing: Wachovia Bank			New York, NY 10001				
Sheet no. <u>18</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_	<u> </u>	(Total of	Sut this			221.30
			(Report on Summary of S		Tot	al	192,635.29

Alexander Gigliotti In re Sherri Lyn Gigliotti

Debtor(s)

Case No.

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.

Debtor's Marital Status:	DEPENDENTS (OF DEBTOR AN	ID SPO	USE		
	RELATIONSHIP(S):	AGI	E(S):			
Married	Son		17			
	Daughter		22			
Employment:	DEBTOR			SPOUSE		
	Steel Fabricator	Reception				
	Joe Gigliotti & Sons Ornamental Iron Wor	Tina's Sa	lon			
How long employed		2 years				
	1530 Lancaster Avenue	404 Penn				
	Reading, PA 19607	Reading,				27 0 I I 27
	or projected monthly income at time case filed)			DEBTOR	*	SPOUSE
	nd commissions (Prorate if not paid monthly)		\$	0.00	\$	975.00
2. Estimate monthly overtime			\$	0.00	\$	0.00
3. SUBTOTAL		Г	\$	0.00	\$	975.00
5. SUBIUTAL		L	Ψ	0.00	Ψ	010100
4. LESS PAYROLL DEDUCTIO	DNS	-				
a. Payroll taxes and social se			\$	0.00	\$	115.14
b. Insurance			\$	0.00	\$	0.00
c. Union dues			\$	0.00	\$	0.00
d. Other (Specify):			\$	0.00	\$	0.00
d. Other (Speeny).			\$	0.00	\$	0.00
			Ψ	0.00	Ψ_	0.00
5. SUBTOTAL OF PAYROLL I	DEDUCTIONS		\$	0.00	\$	115.14
6. TOTAL NET MONTHLY TA	KE HOME PAY		\$	0.00	\$_	859.86
7. Regular income from operation	n of business or profession or farm (Attach detailed	statement)	\$	0.00	\$	0.00
8. Income from real property		,	\$	0.00	\$	0.00
9. Interest and dividends			\$	3,600.00	\$	500.00
	port payments payable to the debtor for the deb	tor's use or		·	·	
that of dependents listed abo			\$	0.00	\$	0.00
11. Social security or governmen					·	
• •			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
12. Pension or retirement income			\$	0.00	\$	0.00
13. Other monthly income			+ <u> </u>		÷	
(Specify):			\$	0.00	\$	0.00
(~F····)/			\$	0.00	\$	0.00
			Ψ		Ψ	0100
14. SUBTOTAL OF LINES 7 TH	HROUGH 13		\$	3,600.00	\$_	500.00
15. AVERAGE MONTHLY INC	COME (Add amounts shown on lines 6 and 14)		\$	3,600.00	\$	1,359.86
16. COMBINED AVERAGE MG from line 15; if there is only one deb	ONTHLY INCOME: (Combine column totals tor repeat total reported on line 15)			\$	4,959	.86

(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:

In re	Alexander Gigliotti Sherri Lyn Gigliotti		Case No.
		Debtor(s)	

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

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 bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

□ 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)	\$	0.00
a. Are real estate taxes included? Yes No _X	ψ	0.00
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$ 1,40	00.00
b. Water and sewer	φ,	50.00
c. Telephone	φ	5.00
d. Other See Detailed Expense Attachment	· · · · · · · · · · · · · · · · · · ·	35.00
3. Home maintenance (repairs and upkeep)		00.00
4. Food		00.00
5. Clothing		00.00
6. Laundry and dry cleaning	φ	25.00
7. Medical and dental expenses	· · ·	10.00
8. Transportation (not including car payments)	\$ 13	30.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions		0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	*	
a. Homeowner's or renter's	\$	0.00
b. Life		0.00
c. Health	Ŧ	0.00
d. Auto	\$ 35	50.91
e. Other		0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	*	
(Specify) Real Estate Taxes	\$ 85	50.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the	Ψ	
plan)		
a. Auto	\$	0.00
b. Other		0.00
c. Other	\$	0.00
d Other	· · · · · · · · · · · · · · · · · · ·	0.00
14. Alimony, maintenance, and support paid to others	· · · · · · · · · · · · · · · · · · ·	0.00
15. Payments for support of additional dependents not living at your home	+	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		0.00
17. Other See Detailed Expense Attachment	*	30.00
	Ψ	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$4,97	75.91
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		

20.		
a.	Average monthly income from Line 15 of Schedule I	\$ 4,959.86
b.	Average monthly expenses from Line 18 above	\$ 4,975.91
c.	Monthly net income (a. minus b.)	\$ -16.05

Debtor(s)

Case No.

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Utility Expenditures:

Trash	\$ 95.00
Cable	\$ 90.00
Total Other Utility Expenditures	\$ 185.00

Other Expenditures:

Car Maintenance	\$ 100.00
Gifts	\$ 50.00
Pet Care	\$ 20.00
School Lunch	\$ 60.00
Medical Dental and Eye	\$ 200.00
Total Other Expenditures	\$ 430.00

United States Bankruptcy Court Eastern District of Pennsylvania

Alexander Gigliotti In re Sherri Lyn Gigliotti

Debtor(s)

Case No. Chapter

11

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: October 4, 2007

/s/ Alexander Gigliotti Alexander Gigliotti Signature of Debtor

Date: October 4, 2007

/s/ Sherri Lyn Gigliotti Sherri Lyn Gigliotti Signature of Debtor Accounts Recovery Bureau P O Box 6768 Wyomissing, PA 19610

Alan R. Mege, Esq. 70 East Broad Street Bethlehem, PA 18016

Alfred W. Crump, Jr., Esq. 520 Washington St. P O Box 1496 Reading, PA 19603

Allied Interstate 800 Interchange West 435 Ford Road Minneapolis, MN 55426-1096

American Express P O Box 360001 Fort Lauderdale, FL 33336

APS Wireless 900 Airport Road West Chester, PA 19380

Arrow Financial Services 5996 W Touhy Avenue Niles, IL 60714

Associates Recovery Systems 201 West Grand Avenue Escondido, CA 92025

Bank of America Visa P O Box 15721 Wilmington, DE 19886 Berks County Tax Claim Bureau 633 Court Street Second Floor Reading, PA 19601

Berks Earned Income Tax Bureau 920 Van Reed Road Wyomissing, PA 19610

Berks ENT Surgical Associates 1 Granite Point Drive Suite 300 Reading, PA 19610

BOC Gases, Inc. 575 Mountain Ave. Murray Hill, NJ 07974

Borough of Kenhorst 339 S. Kenhorst Blvd Kenhorst, PA 19607

Borough of Kenhorst Accounts Recovery Bureau 1136 Penn Avenue Reading, PA 19610

Bush & Kennedy 4336 North Blvd. Suite 204 Baton Rouge, LA 70806

C2C Resources, LLC 56 Perimiter Center East Atlanta, GA 30346

Capital Management Services, LP 726 Exchange Street, Suite 700 Buffalo, NY 14210 Capital One P.O. Box 85184 Richmond, VA 23285

Capital One P O Box 5155 Norcross, GA 30091

CCB Credit Services, Inc. 1045 Outer Park Drive Springfield, IL 62704

Citizens Bank of PA William Levant, Esquire Union Mtg Corporate Center 910 Harvest Dr. Blue Bell, PA 19422

Citizens Bank of Pennsylvania 3025 Chemical Road Suite 240 Plymouth Meeting, PA 19462

City of Reading Reading Area Water Authority 815 Washington Street Reading, PA 19601

Collectech Systems P.O. Box 4157 Woodland Hills, CA 91365

Comcast P O Box 3006 Southeastern, PA 19398

Commonwealth Bank William Colby Jr, Esquire 501 Washington Street Reading, PA 19603 Community Banks P.O. Box 580 1060 Main Street Blue Ball, PA 17506

Computer Credit Inc. Claim Dept 072500 640 West Fourth St P O Box 5238 Winston Salem, NC 27113-5238

CorTrust Bank P O Box 5431 Sioux Falls, SD 57117

Davis Steel Detailing 61 Lindy Lane Boyertown, PA 19512

Debt Recovery Solutions, LLC. P.O. Box 9001 Westbury, NY 11590

Discover P O Box 15251 Wilmington, DE 19886

District Justice Wally Scott 101 North 9th Street Reading, PA 19601

Duron Inc 10406 Tucker Street Beltsville, MD 20705-2201

Express WFNNB Bankruptcy Dept. P O Box 182125 Columbus, OH 43218-2125 Express Scripts, Inc. P O Box 66580 Saint Louis, MO 63166

Fastenal 103 Lancaster Avenue Reading, PA 19611

First Premier Bank P O Box 5524 Sioux Falls, SD 57117

FMS INC 4915 South Union Avenue Tulsa, OK 74107

GAP GE Money Bank Attn: Bankruptcy Department P O Box 103104 Roswell, GA 30076

George S. May Int. & Co. 303 Northwest Hwy Park Ridge, IL 60068-4255

Global Recovery Services CCA, 7805 Hudson Road, Suite 100 Saint Paul, MN 55125

Global Recovery Services India Private L Dept 9500 Los Angeles, CA 90084

HCI Decking P O Box 88 Neffs, PA 18065 Herbein & Co. 2763 Century Blvd Reading, PA 19610

Hon. James F. Stocklas 402 E. Broad Street Bethlehem, PA 18018

Howard Lightman, Esquire 1136 Penn Avenue Wyomissing, PA 19610

HSBC Gold Mastercard P O Box 81622 Salinas, CA 93912

HSBC Platinum MC P O Box 80084 Salinas, CA 93912

Internal Revenue Service Special Procedures Branch Insolvency Unit 1 P.O. Box 12051 Philadelphia, PA 19105-2051

James, Stevens, & Daniels 1283 College Park Drive Dover, DE 19904

Jay Pressman, Esquire 1060 Andrew Drive Suite 170 West Chester, PA 19380

JD's Trash Service 264 Bartlett Street Reading, PA 19611 Kathleen Sonnen, Tax Collector Cumru Toship 1775 Welsh Road Mohnton, PA 19540

Law Offices of Gerald E. Moore P.O. Box 724087 Atlanta, GA 31139

Law Offices of Mitchell N. Kay 7 Penn Plaza New York, NY 10001

Leisawitz Heller 2755 Century Blvd Wyomissing, PA 19610

Loomis Company Park Road Wyomissing, PA 19610

MCI Residential Service P O Box 105271 Atlanta, GA 30348-5271

Met-Ed P O Box 3687 Akron, OH 44309

Morris & Adelman, PC 1920 Chestnut Street P O Box 30477 Philadelphia, PA 19103

National Asset Management Enterprises In P.O. Box 724747 Atlanta, GA 31139 NCO Financial Systems Inc. 507 Prudential Road Horsham, PA 19044

NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044

Nickolaou, Michaels & Evans LTD 7503 W 56th St Summit, IL 60501

Pennsylvania Department of Revenue Commonwealth of Pennsylvania Bankruptcy Division Department 280946 Harrisburg, PA 17128-0496

Plains Commerce Visa P O Box 88020 Sioux Falls, SD 57109

Plaza Associates P.O. Box 18008 Hauppauge, NY 11788

Pramco CV6LLC 6894 Pittsford Palmyra Road 230 Crosskeys Office Park Fairport, NY 14450

Progressive Managemet Systems 1521 West Caneron Ave P O Box 2220 West Covina, CA 91793-9917 Proserpi Schlecter Ctr for Plastic Surge 2603 Keiser Blvd Suite 207 Wyomissing, PA 19610

Reading Area Water Authority 815 Washington Street Anthony Consentino Reading, PA 19601

Richard L. Fritz, Tax Collector Borough of Kenorst 339 S. Kenhorst Blvd Reading, PA 19607

RJM Acquisitions LLC P O Box 18006 Hauppauge, NY 11788

Rose Corporation P O Box 12586 Reading, PA 19612

Salute P O Box 105555 Atlanta, GA 30348

Sears Card P O Box 183081 Columbus, OH 43218-3081

Sprint PCS P.O. Box 62012 Baltimore, MD 21264

Strahn Law Offices 534 Perkiomen Avenue Reading, PA 19606 Stuart D. Kennedy 441 Morgantown Road Reading, PA 19611

Target Visa Target National Bank P O Box 5330 Sioux Falls, SD 57117

Tatyana Ehlikh, MD Reading Hospital and Medical Center P O Box 12872 Philadelphia, PA 19176

Teller & Levit Silvertrust, PC 11 E Adams St. Chicago, IL 60603

The Loomis Company Richard Guida 1100 Berkshire Blvd Suite 201 Reading, PA 19610

The Reading Hospital and Medical Center P O Box 14683 Reading, PA 19612-4683

Toso Igianfranco, MD Reading Hospital & Medical Center P O Box 12872 Philadelphia, PA 19176

Transworld Systems, Inc. 460 Norristown Road #100 Blue Bell, PA 19422 UC Employer Tax Services Field Accounting Services 625 Cherry Street, Room 250 Reading, PA 19602

UGI Utilities Inc. P O Box 13009 Reading, PA 19612

Universal Fidelity Corporation P O Box 941911 Houston, TX 77094

Verizon Wireless P O Box 17120 Tucson, AZ 85731

Verizon Wireless Bankruptcy Department P O Box 3397 Bloomington, IL 61702

Victoria Insurance P O Box 6238 Cleveland, OH 44101

Victoria's Secret WFNNB Bankruptcy Dept. P O Box 182125 Columbus, OH 43218-2125

Wachovia Bank 1 Wachovia Center Charlotte, NC 28288

William Colby Jr. Esquire 501 Washington Street Reading, PA 19603