Case 13-19359-bif	Doc 1	Filed 10/28/13	Entered 10/28/13 19:40:54	Desc Main
		<b>D</b>		

B1 (Official Form 1)(04/13)

## Document Page 1 of 3

United S Easter					Voluntary Petition		
Name of Debtor (if individual, enter Last, First,	Name	of Joint D	ebtor (Spous	e) (Last, First, Mi	ddle):		
Edgmont Country Club							
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	years					Joint Debtor in th I trade names):	ie last 8 years
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all) 23-1736952	yer I.D. (ITIN)/Complet	e EIN		our digits of the state		r Individual-Taxp	bayer I.D. (ITIN) No./Complete EIN
Street Address of Debtor (No. and Street, City, an 5180 West Chester Pike Edgemont, PA		ZIP Code	Street .	Address o	f Joint Debto	r (No. and Street,	City, and State): ZIP Code
	190	)28					
County of Residence or of the Principal Place of <b>Delaware</b>	Business:		County	of Resid	ence or of the	Principal Place of	of Business:
Mailing Address of Debtor (if different from stree P.O. Box 207 Edgemont, PA			Mailin	g Address	of Joint Deb	tor (if different fr	om street address):
	2 190	CIP Code	-				ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	<u>[ 190</u>	<u> </u>	_1				<b>I</b>
Type of Debtor	Nature of B				-		Code Under Which
<ul> <li>(Form of Organization) (Check one box)</li> <li>Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.</li> <li>Corporation (includes LLC and LLP)</li> <li>Partnership</li> <li>Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>	(Check one Check one Health Care Busine Single Asset Real E in 11 U.S.C. § 101 Railroad Stockbroker Commodity Broker Clearing Bank	ess Estate as de (51B)	fined	<ul> <li>Chapt</li> <li>Chapt</li> <li>Chapt</li> <li>Chapt</li> <li>Chapt</li> </ul>	ter 7 ter 9 ter 11 ter 12	of a Fo	(Check one box) er 15 Petition for Recognition breign Main Proceeding er 15 Petition for Recognition breign Nonmain Proceeding
Chapter 15 Debtors	Other		ŀ			Nature of 1	Debts
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organizatio under Title 26 of the United States Code (the Internal Revenue Code).			s	defined "incurr			Debts are primarily business debts.
Filing Fee (Check one box)		Check one	box:		Chap	ter 11 Debtors	
<ul> <li>Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.</li> <li>Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</li> </ul>				small busi gate nonco 2,490,925 ( boxes: g filed with f the plan w	ness debtor as o ntingent liquid <i>amount subject</i> this petition.	t to adjustment on 4.	
Statistical/Administrative Information						THIS SPA	CE IS FOR COURT USE ONLY
<ul> <li>Debtor estimates that funds will be available f</li> <li>Debtor estimates that, after any exempt prope there will be no funds available for distributio</li> </ul>	rty is excluded and adm	inistrative		paid,			
Estimated Number of Creditors	<b>) [] []</b> .000- 5,001- 10,	.001- 25	,001-	<b>D</b> 50,001- 100,000	<b>D</b> OVER 100,000		
\$50,000 \$100,000 \$500,000 to \$1 to million m	.000.001 \$10,000.001 \$50	5100 to 3	0,000,001	500,000,001 to \$1 billion	More than \$1 billion		
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Case	13-19359-bif	E
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B1 (Official Fo	Document	Page 2 of 3	Page 2
Voluntai	ry Petition	Name of Debtor(s):	
(This page m	ust be completed and filed in every case)	Edgmont Country Club	
	All Prior Bankruptcy Cases Filed Within Last	<b>8 Years</b> (If more than two, atta	ch additional sheet)
Location Where Filed:		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
	ending Bankruptcy Case Filed by any Spouse, Partner, or		e than one, attach additional sheet)
Name of Deb Edgmont C	tor: Golf Club, Inc.	Case Number: 13-19358	Date Filed: 10/28/13
District: Eastern Di	strict of Pennsylvania	Relationship: Affiliate	Judge: Stephen Raslavich
	Exhibit A	(To be completed if debter is an ind	Exhibit B ividual whose debts are primarily consumer debts.)
forms 10K a pursuant to and is reque	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petitioner is have informed the petitioner that 12, or 13 of title 11, United State	named in the foregoing petition, declare that I t [he or she] may proceed under chapter 7, 11, es Code, and have explained the relief available er certify that I delivered to the debtor the notice
		ibit C	
☐ Yes, and ■ No. (To be comp ☐ Exhibit If this is a join	leted by every individual debtor. If a joint petition is filed, eac D completed and signed by the debtor is attached and made a	<b>ibit D</b> ch spouse must complete and att a part of this petition.	
	Information Regarding		
	(Check any ap) Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for a	l place of business, or principal	assets in this District for 180 nan in any other District.
	There is a bankruptcy case concerning debtor's affiliate, get		
Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
	<b>Certification by a Debtor Who Resides</b> (Check all appl		operty
	Landlord has a judgment against the debtor for possession		cked, complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the the entire monetary default that gave rise to the judgment for	ere are circumstances under which or possession, after the judgment	ch the debtor would be permitted to cure t for possession was entered, and
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Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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<b>B1</b> (Official	Form	1)(04/13)
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Signatures       Signatures         Signatures       Signatures         Signatures       Signatures         If declare under penalty of pripty hat the information provided in this petition.       Ideclare under penalty of pripty that the information provided in this petition.         If petitore is an individual whose debs are pinarity commune debt and than obtained in the under the petition.       Ideclare under penalty of pripty that the information provided in this petiton.         If petitore is an individual whose debta are pinarity commune debt and the net of a concentence with chapter 1 and the order penalty of peritor that the information provided in this petiton.       Identify the information provided in this petiton.         If request relifs in accordance with chapter of site 11, United States Code, specific in the settion.       Code to any occurate with chapter 1 and the order penalty of peritor that the information in the setting in the order penalty of peritor that the information in the setting in the order penalty of peritor that the information in the order penalty of peritor the order penalty of peritor the order penalty of peritor the information in the order penalty of peritor the information in the order penalty of peritor the information in the order penalty of peritor the order penalty of peritor the order penalty of peritor the information in the order penalty of peritor the order penalty of peritor the order penalty of peritor the information in the order penalty of peritor the information in the order penalty of peritor the order penalty of perinformating the order penalty of perinformation in the	
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1 declare under penalty of perjury that the information provided in this petition true and correct.       If endower is an individual whole debia are primarily consumer debia and official methods are present and and one and the petition in the analysis of the information in provided in this petition are and information and reach as chapter, and choice to proceed under chapter 7. If no according, and near the andre present and and one barakneys petition present and and the analysis of the information are official in this petition.         If constance y represents and choice to proceed under chapter 7. If no according, and near the action equipment of a state official in this petition.       If the according and the chapter of this 11. Using States Code, specified in this petition the petition in the petition	
Implementation is not and correct, the function is not performed and in the sector of the secore of the sector of the sector of the sector	
charter /, 11, 26 of 126 dtil, 1, United State Code, understand the relier         charter of an obst charter and charter operated under chapter / and the softer operater of the charter	s 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.
In a lamber represent line and no banknupty petition preparer signs the petition   Law Sci section and the other equivalence with the chapter of tile  1, United States Code, specified in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of tile  1, periodic in this petition. A confide copy of the other granting of the document of the foreign Representative         X       Signature of Dobtor         X       Signature of Autority of Dobtor(s)         Date       Signature of Autority for Dobtor(s)         Address       Printed Name and tile, if any, of Bankrupicy Petition Preparer         1300 Spruce Street       Philadelphia, PA 15103         Address       Signature of Autority Petition Preparer         Signature of Cobor 28, 2013       Date         **       Signature of Cobor 28, 2013         Date       Signature of Dobtor (Corporation/Partnership)         1 declare under penalty of peripsy that the information provided in this periodic so incorrect.         Signature of Autorized Individual         Printed Name of Autorized Individual         Pr	
I provide the finance of the chapter of title 11, United States Code, specified in mis pension. A certified or good of the order granting reception of the forcing main proceeding is anached.         X       Signature of Debtor         X       Signature of Joint Debtor         Telephone Number (If not represented by attorney)       Signature of Attorney Bankruptcy Petition Preparer         Date       Signature of Attorney of Debtor(s)         Aris J, Kafuls       Signature of Attorney for Debtor(s)         Maschmeyer Karalis P.C.       Firm Name         Phined Name of Attorney for Debtor(s)       Maschmeyer Karalis P.C.         Phined Name of Attorney for Debtor(s)       Maschmeyer Karalis P.C.         Phined Name of Attorney for Debtor(s)       Maschmeyer Karalis P.C.         Phined Name of Attorney for Debtor(s)       Maschmeyer Karalis P.C.         Phined Name of Attorney for Debtor(s)       Maschmeyer Karalis P.C.         Phined Name of Attorney base knowledge after an inquiry that the telefor notion the Color parent of the dofter. principal, responsible form the Social Security number of the other. principal, responsible form the debtor notion of the structure, and cover, and that have been auboration of the structure of th	Certified copies of the documents required by 11 U.S.C. §1515 are attached.
Signature of Debtor         X         Signature of Joint Debtor         Telephone Number (if not represented by attorney)         Date         Date         Signature of Attorney for Debtor(s)         Aria J. Karalis         Printed Name of Attorney for Debtor(s)         Machine of Debtor (Corporation/Partnership)         I televia the schetalls is instornet.	of the order amount of the order amount of the order amount
X       Signature of Joint Debtor         Telephone Number (If not represented by attorney)       Date         Date       Signature of Non-Attorney Bankruptcy Petition Preparer         V       Signature of Attorney (Social Life) (Socia	X
Signature of Joint Debtor         Telephone Number (If not represented by attorney)         Date         Date         Signature of Non-Attorney Bankruptcy Petition Preparer         X         Signature of Attorney for Debtor(s)         Aria J. Karalis         Printed Name of Attorney for Debtor(s)         Firm Name         1900 Spruce Street         Philedelphia, PA 19103         (215) 546-4500 Fax: (215) 985-4175         Telephone Number         Cottoer 28, 2013         Date         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in disperiod.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in disperiod.         Signature of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Patter Ariania         I'more than one person prepared this document attach additional sheets configured the debtor.         Signature of Authorized Individual         Patter Mariani         Printed Name of Authorized Individual         Address         X         Signature of Authorized Individual         Address	Signature of Foreign Representative
Telephone Number (If not represented by attorney)         Date         Date         Signature of Non-Attorney Bankruptcy Petition Preparer         I declare under penalty of perjury that (D) I an a bankruptcy petition preparer as defined in 11 US.C. § 110; (2) prepared this document for minipate periode of the observation and have provided the closer with an organized in the socretary periode personant on the uS.C. § 110; (2) prepared this document for minipate periode prevaints in the US.C. § 110; (2) prepared this document for minipate periode personant on the uS.C. § 110; (2) prepared this document for minipate periode personant on the uS.C. § 110; (2) prepared this document for minipate periode personant on the uS.C. § 110; (2) prepared this document for minipate periode personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared this document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the used the under personant on the user personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the user personant on the uS.C. § 110; (2) prepared the document for minipate personant on the uS.C. § 110; (2) prepared the document for minipate personant on the user personant on the user per	Printed Name of Foreign Representative
Date       Signature of Non-Attorney Bankruptcy Petition Preparer Signature of Non-Attorney Bankruptcy petition prepares a field in 11 U.S.C. 8110(b). and 342(b) and 10 (c).C. 8110(c).C. 8110(c)	Date
Signature of Attorney*         X         Signature of Attorney for Debtor(s)         Aris J. Kafalis         Printed Name of Attorney for Debtor(s)         Aris J. Kafalis         Printed Name of Attorney for Debtor(s)         Aris J. Kafalis         Printed Name of Attorney for Debtor(s)         Maschmeyer Karalis P.C.         Firm Name         1900 Spruce Street         Philadelphia, PA 19103         Address         (215) 546-4500 Fax: (215) 985-4175         Telephone Number         Cetober 28, 2013         Date         *In a case m which § 707(b(4)(D) applies, this signature also constitutes a certification hat the atomey has no knowledge after an inquiry that the information in the schedules in incorrect.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of printy that the information provided in this petition on the advorted fination provided in this petition on the chail of the debtor.         Signature of Authorized Individual         Pater Mariani         Printed Name of Authorized Individual         Pater Mariani         Printed Name of Authorized Individual         Phile delividual         Phile delividual         Mater Farmanian Printed Name of Authorized Individual         Pater Mariani	Signature of Non-Attorney Bankruptcy Petition Preparer
Signature of Attorney*         X         Signature of Attorney for Debtor(s)         Aris J. Kafalis         Printed Name of Attorney for Debtor(s)         Aris J. Kafalis         Printed Name of Attorney for Debtor(s)         Maschmeyer Karalis P.C.         Firm Name         1900 Spruce Street         Philadelphia, PA 19103         Address         (215) 548-4500 Fax: (215) 985-4175         Telephone Number         October 28, 2013         Date         *In a case in which § 707(b(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information provided in this petition to the atom or partner of the chapter of the list petition to the atom or partner of the chapter of the list petition on the atom or partner of the chapter of the list petition on the atom or partner of the chapter of the list petition on the chapter of the list petition on the chapter of the list petition on the atom or partner of the list petition on the chapter of the list	I declare under penalty of perjury that: (1) I am a hankruptcy perjuion
X	preparer as defined in 11 U.S.C. 8 110: (7) I prepared this document for
X       Signature of Attopey for Debtor(s)         Aris J. Karalis       Aris J. Karalis         Printed Name of Attomey for Debtor(s)       Maschmeyer Karalis P.C.         Firm Name       1900 Spruce Street         Philadelphia, PA 19103       Printed Name and title, if any, of Bankruptcy Petition Preparer         Address       Social-Security number of the observation of the officer, principal, responsible person or partner of the bankruptcy petition preparer is not an individual. State the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer of the bankruptcy petition preparer of the observation of the officer, principal, responsible person or partner whose Social Security number of the observation of the theory of the observation of the debtor.         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 autorized for the the period above.         Signature of Authorized Individual       Pater Mariani         Printed Name of Authorized Individual       If more than one person preparer of all other individuals who prepared on assist of persons of all other individuals of the theory of the operation of the appropriate of ficial form for each person.	and the nonces and information required under 11 U.S.C. 38 110(b)
Signature of Attomes for Debtor(s)       Aris J. Karalis         Aris J. Karalis       Chargeable by businer, have given the debtor, notice of the debtor, as required in this section.         Printed Name of Attomey for Debtor(s)       Maschmeyer Karalis P.C.         Firm Name       Printed Name of Attomey for Debtor(s)         Maschmeyer Karalis P.C.       Printed Name of Attomey for Debtor(s)         Maschmeyer Karalis P.C.       Printed Name of Attomey for Debtor(s)         Maschmeyer Karalis P.C.       Printed Name of Attomey for Debtor(s)         Maschmeyer Karalis P.C.       Printed Name and title, if any, of Bankruptcy Petition Preparer         1900 Spruce Street       Printed Name and title, if any, of Bankruptcy Petition Preparer         Address       Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the binkruptcy petition preparer.)(Required by 11 U.S.C. § 110.)         (215) 546-4500 Fax: (215) 985-4175       Telephone Number         Telephone Number       Social-Security number of the binkruptcy petition preparer of officer, principal, responsible person or partner of the bankruptcy Petition preparer or officer, principal, responsible person or partner whose Social-Security number is provided above.         I declare under penalty of perjury that the information provided in this petition is the addres relief in accordance with the chapter of dute 11, United State to duthorized Individual       Date         Signature of Authorized Individual <td< td=""><td>110(n), and 342(b); and, (3) if rules or guidelines have been promulgated</td></td<>	110(n), and 342(b); and, (3) if rules or guidelines have been promulgated
Aris J. Karalis       V         Printed Name of Attorney for Debtor(s)       Of the maximum amount before preparing any document for filing for a docum	Chargeable by banknintcy petition preparers. I have given the debter nation
Printed Name of Attomey for Debtor(s)       Official Form 19 is anached.         Maachmeyer Karalis P.C.       Printed Name and title, if any, of Bankruptcy Petition Preparer         1900 Spruce Street       Printed Name and title, if any, of Bankruptcy Petition Preparer is not an individual, state the Social Security number of the officer. principal, responsible person or partner of the bankruptcy petition preparer is not an individual, state the Social Security number of the officer. principal, responsible person or partner of the bankruptcy petition preparer or officer. Principal, responsible person.         (215) 546-4500 Fax: (215) 985-4175       Address         Telephone Number       October 28, 2013         Date       Address         *In a case m which § 707(b)(4)(D) applies, this signature also constitutes a information in the schedules is incorrect.       X         Signature of Debtor (Corporation/Partnership)       I declare under penalty of perjury that the information provided in this petition is true and correct, and that 1 have been authorized to file this petition on behalf of the debtor.       Date         Signature of Authorized Individual       Peter Mariani       If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.         Signature of Authorized Individual       If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.         Signature of Authorized Individual       If more than one person prepared this document, attach additional sheet	Of the maximum amount before prenaring any document for filling for a
Maschmeyer Karalis P.C.         Firm Name         1900 Spruce Street         Philadelphia, PA 19103         Address         Gates         (215) 546-4500 Fax: (215) 985-4175         Telephone Number         October 28, 2013         Date         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the automy has no knowledge after an inquiry that the information provided in this petition in the schedules is incorrect.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in this petition on behalf of the debtor.         The debtor requests relief in accordance with the chapter of tide 11, United Start Coffice Individual         Peter Mariani         Printed Name of Authorized Individual         Chelf Financial Officer         Title of Authorized Individual	Official Form 19 is attached.
Firm Name       1900 Spruce Street         1900 Spruce Street       Printed Name and title, if any, of Bankruptcy Petition Preparer         Address       Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)         (215) 546-4500 Fax: (215) 985-4175       Address         Telephone Number       Address         October 28, 2013       Address         Jate       Address         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information in the schedules is incorrect.       X         Ideclare under penalty of perjury that the information provided in this petition is rue and correct, and that I have been authorized to file this petition on behalf of the debure.       Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security numbers is provided above.         Names and Social-Security numbers of all other individuals who prepared on assisted in preparing this document unless the bankruptcy petition preparer i not an individual.         With Prince Name of Authorized Individual       If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.         Signature of Authorized Individual       If more than one person preparer this document, attach additional sheets conforming to the appropriate off	
1900 Spruce Street         Philadelphia, PA 19103         Address         Social-Security number (If the banknutpcy petition preparer is not an individual, state the Social Security number of the officer. principal, responsible person or partner of the banknuptcy petition preparer.)(Required by 11 U.S.C. § 110.)         (215) 546-4500 Fax: (215) 985-4175         Telephone Number         October 28, 2013         Date         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information provided in this petition is nue and correct.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in this petition on behalf of the debtor.         The debtor requests relief in accordance with the chapter of title 11, United Stars Corresponding the formation previded in this petition.         Signature of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Chief Financial Officer         Title of Authorized Individual	Printed Name and title if any of Bankruntey Patition Dranger
Philadelphia, PA 19103         Address         Address         Social-Security number (If the banknutpcy petition preparer is not an individual, state the Social Security number of the officer. principal, responsible person or partner of the banknutpcy petition preparer.)(Required by 11 U.S.C. § 110.)         (215) 546-4500 Fax: (215) 985-4175         Telephone Number         October 28, 2013         Date         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the automey has no knowledge after an inquiry that the information in the schedules is incorrect.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in this petition on behalf of the debtor.         The debtor requests relief in accordance with the chapter of tide 11, United States CORespecified in this petition.         Signature of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Chief Financial Officer         Title of Authorized Individual	and the the the, h any, of Bankinpicy relition riepater
Address       an individual, state the Social Security number of the officer.         Image: Control of the security number of the security number of the security number of the security number.         October 28, 2013         Date         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the automey has no knowledge after an inquiry that the information in the schedules is incorrect.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.         The debtor requests relief in accordance with the chapter of tide 11, United States CORE-specified in this petition.         Signature of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Chief Financial Officer         Title of Authorized Individual	Equil 9
Telephone Number         October 28, 2013         Date         *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information in the schedules is incorrect.         Signature of Debtor (Corporation/Partnership)         I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.         The debtor requests relief in accordance with the chapter of title 11, United State: Code, specified in this petition.         Signature of Authorized Individual         Peter Mariani         Printed Name of Authorized Individual         Title of Authorized Individual	an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruncy petition
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