3/08/07	4:21PM

Official Form 1 (10/06)		x			
	States Bankruptcy (rn District of Pennsylva			Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): DeSimone's Pesonal Care Home, Inc.			Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			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 otl 25-1754136	her Tax ID No. (if more than one, state a	11) Last fo	our digits of Soc. Sec./Complete	EIN or other Tax ID No. (if more than one, state all	
Street Address of Debtor (No. and Street, City, a PO Box 1561 Beaver Falls, PA	nd State):	Street	Address of Joint Debtor (No. an	d Street, City, and State):	
	ZIP Code	_		ZIP Code	
County of Residence or of the Principal Place of Beaver	Business: 15010	Count	County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from stre	et address):	Mailin	Mailing Address of Joint Debtor (if different from street address):		
	ZIP Code			ZIP Code	
Location of Principal Assets of Business Debtor (if different from street address above):					
Type of Debtor (Form of Organization)	Nature of Business (Check one box)			kruptcy Code Under Which is Filed (Check one box)	
 (Check one box) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Health Care Business Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organi under Title 26 of the United S Code (the Internal Revenue C 		efined	Chapter 11 Chapter 12 Chapter 13	 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding 	
		States		as business debts.	
 Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. 			Debtor is a small business debt Debtor is not a small business d if: Debtor's aggregate nonconting to insiders or affiliates) are less all applicable boxes: A plan is being filed with this p	petition. folicited prepetition from one or more	
 Statistical/Administrative Information Debtor estimates that funds will be available Debtor estimates that, after any exempt properties there will be no funds available for distribution 	erty is excluded and administrative			THIS SPACE IS FOR COURT USE ONLY	
Estimated Number of Creditors 1- 50- 100- 200- 49 99 199 999 ■ □ □ □		25,001- 50,000	100,001- OVER 100,000 100,000		
Estimated Assets \$0 to \$10,000 \$10,000 \$100,000),001 to nillion	More than \$100 million		
Estimated Liabilities \$0 to \$50,000 \$50,000 \$50,000 \$100,000),001 to nillion	More than \$100 million		

Official Form	1 (10/06)		FORM B1, Page 2		
Voluntar	y Petition	Name of Debtor(s): DeSimone's Pesonal Care Home, Inc.			
(This page mu	ust be completed and filed in every case)				
	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than two, at	tach additional sheet)		
Location Where Filed:	Western Pennsylvania	Case Number: 05-23976-BM	Date Filed: 4/01/05		
Location Where Filed:	Western Pennsylvania	Case Number: 03-29379-BM	Date Filed: 7/28/03		
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If me	ore than one, attach additional sheet)		
Name of Debt - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		Exhibit B		
 (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) □ Exhibit A is attached and made a part of this petition. (To be completed if debtor is an individual whose debts are primarily consumer d I, the attorney for the petitioner named in the foregoing petition, declare have informed the petitioner that [he or she] may proceed under chapter 12, or 13 of title 11, United States Code, and have explained the relief ar under each such chapter. I further certify that I delivered to the debtor the required by 11 U.S.C. §342(b). X Signature of Attorney for Debtor(s) 					
		Signature of Attorney for E			
 No. (To be comp Exhibit If this is a join Exhibit 	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made int petition: D also completed and signed by the joint debtor is attached a Information Regardin (Check any ap Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	a part of this petition. and made a part of this petition ng the Debtor - Venue oplicable box) al place of business, or princip a longer part of such 180 days	al assets in this District for 180 s than in any other District.		
 There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. 					
Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)					
	Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)				
	(Name of landlord that obtained judgment)				
	Debtor claims that under applicable nonbankruptcy law, the 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.	ourt of any rent that would beco	ome due during the 30-day period		

Official Form 1 (10/06)	FORM B1, Page
Voluntary Petition	Name of Debtor(s): DeSimone's Pesonal Care Home, Inc.
This page must be completed and filed in every case)	
	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	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)
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.	 I request relief in accordance with chapter 15 of title 11. United States Cod 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
[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).	of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	X
X	Printed Name of Foreign Representative
Signature of Debtor	
X	Date
Signature of Joint Debtor	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 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 $\frac{11}{2}$
Signature of Attorney	guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy
	petition preparers, I have given the debtor notice of the maximum
X /s/ Robert O Lampl, Attorney at Law	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. Official Form 19B is attached.
Robert O Lampl, Attorney at Law	official form 175 is attached.
Printed Name of Attorney for Debtor(s)	Printed Name and title, if any, of Bankruptcy Petition Preparer
Robert O Lampl, Attorney at Law	Timed Name and due, if any, of Dankrupery Fendon Freparer
Firm Name 960 Penn Avenue, Suite 1200 Pittsburgh, PA 15222	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	propuent/required by 11 0.0.0. \$ 110.)
412-392-0330 Fax: 412-392-0335	
Telephone Number	Address
March 8, 2007	
Date	_ X
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in	Date
this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	provided above. Names and Social Security numbers of all other individuals who
X /s/ Ralph Scott Shearer Signature of Authorized Individual	prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Ralph Scott Shearer	
Printed Name of Authorized Individual	If more than one nerver prepared this down out of the body of the
President	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	
March 8, 2007 Date	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court Western District of Pennsylvania

In re **DeSimone's Pesonal Care Home, Inc.**

Debtor(s)

Case No. Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to

the best of my knowledge.

Date: March 8, 2007

/s/ Ralph Scott Shearer

Ralph Scott Shearer/President Signer/Title

Connie T. Javens, Treasurer Beaver Courthouse, Third Street Beaver, PA 15009

Duquesne Light 411 7th Avenue PO Box 1930 Pittsburgh, PA 15230

First National Bank 4140 East State Street Hermitage, PA 16148

IRS Federated Investor Tower 1001 Liberty Avenue, Suite 1300 Pittsburgh, PA 15222

PA Department of Labor & Industry 933 Penn Avenue, 2nd Floor Pittsburgh, PA 15222

PA Department of Revenue Dept. 2800427 Harrisburg, PA 17128