

**United States Bankruptcy Court
Western District of Pennsylvania**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Klesyk, Kenneth W	Name of Joint Debtor (Spouse) (Last, First, Middle): Klesyk, Deborah A
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): DBA Specialty Awning and Remodeling	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. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-9612	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-9493
Street Address of Debtor (No. and Street, City, and State): 423 Belmont St Johnstown, PA	Street Address of Joint Debtor (No. and Street, City, and State): 423 Belmont St Johnstown, PA
ZIP Code 15904	ZIP Code 15904
County of Residence or of the Principal Place of Business: Cambria	County of Residence or of the Principal Place of Business: Cambria
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor (if different from street address above):

Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
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Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> 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. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information

Debtor estimates that funds will be available for distribution to unsecured creditors.
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000

Estimated Assets

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

Estimated Liabilities

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Klesyk, Kenneth W Klesyk, Deborah A</p>
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

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

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>
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Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.
 No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:
 Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

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

Name of Debtor(s):

**Klesyk, Kenneth W
Klesyk, Deborah A**

Signatures

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

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

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

X /s/ Kenneth W Klesyk
Signature of Debtor **Kenneth W Klesyk**

X /s/ Deborah A Klesyk
Signature of Joint Debtor **Deborah A Klesyk**

Telephone Number (If not represented by attorney)

June 11, 2008
Date

Signature of a Foreign Representative

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

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 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

Printed Name of Foreign Representative

_____ Date

Signature of Attorney*

X /s/ David J. Novak
Signature of Attorney for Debtor(s)

David J. Novak 53532
Printed Name of Attorney for Debtor(s)

Spence, Custer, Saylor, Wolfe & Rose
Firm Name

**400 Ameriserv Financial Building
P.O.Box 280
Johnstown, PA 15907-0280**

Address

Email: dnovak@spencecuster.com

814 536-0735 Fax: 814 539-1423
Telephone Number

June 11, 2008
Date

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

Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

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

Address

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 provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

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

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

_____ Date

United States Bankruptcy Court
Western District of Pennsylvania

In re Kenneth W Klesyk
Deborah A Klesyk

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.*

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.]* _____

United States Bankruptcy Court
Western District of Pennsylvania

In re Kenneth W Klesyk
Deborah A Klesyk

Debtor(s)

Case No. _____

Chapter 11

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United States Bankruptcy Court
Western District of Pennsylvania

In re **Kenneth W Klesyk**
Deborah A Klesyk

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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Allegheny General Anesthesia PO Box 951915 Cleveland, OH 44193-0021	Allegheny General Anesthesia PO Box 951915 Cleveland, OH 44193-0021	Services rendered		1,352.56
Allegheny General Hospital 320 East North Avenue Pittsburgh, PA 15212	Allegheny General Hospital 320 East North Avenue Pittsburgh, PA 15212	Services rendered		526.00
Allegheny General Hospital 320 East North Avenue Pittsburgh, PA 15212	Allegheny General Hospital 320 East North Avenue Pittsburgh, PA 15212	Services rendered		525.68
Bank of America PO Box 1390 Norfolk, VA 23501	Bank of America PO Box 1390 Norfolk, VA 23501	Credit card purchases		5,494.00
Cardiology Associates 1123 Franklin Street Johnstown, PA 15905	Cardiology Associates 1123 Franklin Street Johnstown, PA 15905	Services rendered		600.00
Chase 800 Brooksedge Blvd Westerville, OH 43081	Chase 800 Brooksedge Blvd Westerville, OH 43081	Credit card purchases		19,323.00
Chase 800 Brooksedge Blvd Westerville, OH 43081	Chase 800 Brooksedge Blvd Westerville, OH 43081	Credit card purchases		14,316.00
Commonwealth of Pennsylvania Department of Revenue Bureau of Compliance Department 280946 Harrisburg, PA 17128-0946	Commonwealth of Pennsylvania Department of Revenue Bureau of Compliance Harrisburg, PA 17128-0946	Unemployment Compensation Taxes		835.00
First Card Conv c/o Unifund 10625 Techwoods Circle Cincinnati, OH 45242	First Card Conv c/o Unifund 10625 Techwoods Circle Cincinnati, OH 45242	Credit card purchases		22,799.00
Internal Revenue Service Special Procedures Section Bankruptcy Section P.O. Box 628 Pittsburgh, PA 15230	Internal Revenue Service Special Procedures Section Bankruptcy Section Pittsburgh, PA 15230	Unpaid 940 and 941 Taxes		190,846.00

In re **Kenneth W Klesyk**
Deborah A Klesyk

Debtor(s)

Case No. _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Internal Revenue Service SPB Insolvency Section Federated Investors Tower 1001 Liberty Avenue Pittsburgh, PA 15222	Internal Revenue Service SPB Insolvency Section Federated Investors Tower Pittsburgh, PA 15222	Unpaid 1040 Taxes from 1999 through 2005		73,903.00
Jan M. Savit, MD, PC 422 Main Street Suite 202 Johnstown, PA 15901	Jan M. Savit, MD, PC 422 Main Street Suite 202 Johnstown, PA 15901	Services rendered		2,802.00
MBNA P.O. Box 15137 Wilmington, DE 19886-5137	MBNA P.O. Box 15137 Wilmington, DE 19886-5137	Credit card purchases		9,987.00
Memorial Medical Center 1086 Franklin Street Johnstown, PA 15905-4305	Memorial Medical Center 1086 Franklin Street Johnstown, PA 15905-4305	Services rendered		5,730.82
Memorial Medical Center 1086 Franklin Street Johnstown, PA 15905-4305	Memorial Medical Center 1086 Franklin Street Johnstown, PA 15905-4305	Services rendered		1,837.00
PA Dept. of Labor and Industry Attn: Deborah C. Phillips, Esq. 914 Penn Avenue, 6th Floor Pittsburgh, PA 15222	PA Dept. of Labor and Industry Attn: Deborah C. Phillips, Esq. 914 Penn Avenue, 6th Floor Pittsburgh, PA 15222	Unemployment Compensation Taxes		2,323.00
Presidio/CM 101 Crossway Park West Woodbury, NY 11797	Presidio/CM 101 Crossway Park West Woodbury, NY 11797	Credit card purchases		8,951.00
Providian PO Box 66022 Dallas, TX 75266	Providian PO Box 66022 Dallas, TX 75266	Credit card purchases		10,340.00
Sears/CBSD P.O. Box 6189 Sioux Falls, SD 57117	Sears/CBSD P.O. Box 6189 Sioux Falls, SD 57117	Credit card purchases		17,609.00
Verizon Wireless P.O. Box 17464 Baltimore, MD 21297-1464	Verizon Wireless P.O. Box 17464 Baltimore, MD 21297-1464	Cellular services for business		1,133.00

In re **Kenneth W Klesyk**
Deborah A Klesyk _____
Debtor(s)

Case No. _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

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

We, **Kenneth W Klesyk** and **Deborah A Klesyk**, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date **June 11, 2008** _____

Signature **/s/ Kenneth W Klesyk**
Kenneth W Klesyk
Debtor

Date **June 11, 2008** _____

Signature **/s/ Deborah A Klesyk**
Deborah A Klesyk
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.

Allegheny General Anesthesia
PO Box 951915
Cleveland, OH 44193-0021

Allegheny General Hospital
320 East North Avenue
Pittsburgh, PA 15212

Allegheny General Hospital
PO Box 951856
Cleveland, OH 44193

Allegheny Radiology Associates, Ltd.
PO Box 49
-0049, PA 15230

AmeriServ Financial
P.O. Box 520
Johnstown, PA 15907

Apothaker & Associates
520 Fellowship Rd Fl 1
Mount Laurel, NJ 08054

Bank of America
PO Box 1390
Norfolk, VA 23501

Cambria County Tax Claim
200 S Center St
Ebensburg, PA 15931

Cardiology Associates
1123 Franklin Street
Johnstown, PA 15905

Chase
800 Brooksedge Blvd
Westerville, OH 43081

Collection Service Cente
PO Box 14931
Pittsburgh, PA 15234

Commonwealth of Pennsylvania
Department of Revenue
Bureau of Compliance
Department 280946
Harrisburg, PA 17128-0946

Conemaugh Memorial Med Ctr Op
1086 Franklin Steet
Johnstown, PA 15905

Credit Management Co.
2121 Noblestown Rd.
Pittsburgh 15205

Credit Managment Co.
2121 Noblestown Rd
Pittsburgh, PA 15205

First Card Conv
c/o Unifund
10625 Techwoods Circle
Cincinnati, OH 45242

Internal Revenue Service
SPB Insolvency Section
Federated Investors Tower
1001 Liberty Avenue
Pittsburgh, PA 15222

Internal Revenue Service
Special Procedures Section
Bankruptcy Section
P.O. Box 628
Pittsburgh, PA 15230

Jan M. Savit, MD, PC
422 Main Street
Suite 202
Johnstown, PA 15901

LVNV Funding LLC
PO Box 10497
Greenville, SC 29603

LVNV Funding LLC
P.O. Box 10497
Greenville, SC 29603

MBNA
P.O. Box 15137
Wilmington, DE 19886-5137

Memorial Medical Center
1086 Franklin Street
Johnstown, PA 15905-4305

Memorial Medical Center
c/o Mancing & Associates Inc.
PO Box 831
Coraopolis, PA 15108

Midland Credit Mgmt
8875 Aero Drive
San Diego, CA 92123

Midland Credit Mgmt
8875 Aero Dr.
San Diego, CA 92123

NCO FIN/22
507 Prudential Rd.
Horsham, PA 19044

PA Department of Revenue
Bureau of Individual Taxes
P.O. Box 280432
Harrisburg, PA 17128-0432

PA Dept. of Labor and Industry
Attn: Deborah C. Phillips, Esq.
914 Penn Avenue, 6th Floor
Pittsburgh, PA 15222

Presidio/CM
101 Crossway Park West
Woodbury, NY 11797

Providian
PO Box 66022
Dallas, TX 75266

Sears/CBSD
P.O. Box 6189
Sioux Falls, SD 57117

Unifund
10625 Techwoods Circle
Cincinnati, OH 45242

Verizon Wireless
P.O. Box 17464
Baltimore, MD 21297-1464