			ruptcy (Pennsylva					Vol	untary Petition
Name of Debtor (if individual, enter Last, F Strawn, Maurice R. Jr.	rst, Middle):	:		Name	of Joint De	ebtor (Spouse	e) (Last, First,	, Middle):	
All Other Names used by the Debtor in the l (include married, maiden, and trade names):	ıst 8 years						Joint Debtor trade names		years
Last four digits of Soc. Sec. or Individual-Ta (if more than one, state all)	xpayer I.D.	(ITIN) No./	Complete EI	N Last for	our digits or e than one, s	f Soc. Sec. or tate all)	r Individual-7	Гахрауег I.I	D. (ITIN) No./Complete EI
Street Address of Debtor (No. and Street, Ci 216 Bethel Street Hollsopple, PA	y, and State)	_	ZIP Code		Address of	Joint Debtor	r (No. and Str	reet, City, a	nd State): ZIP Code
County of Residence or of the Principal Place Somerset	e of Busines		<u>15935</u>	Count	y of Reside	ence or of the	Principal Pla	ace of Busin	ness:
Mailing Address of Debtor (if different from	street addres	ss):		Mailin	g Address	of Joint Debt	tor (if differen	nt from stre	et address):
		Г	ZIP Code	\dashv					ZIP Code
Location of Principal Assets of Business De (if different from street address above):	otor								
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 Nature of Business (Check one box) Health Care Business Single Asset Real Estate as of in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank				☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte	the ler 7 er 9 er 11 er 12	Petition is Fi □ Cl of □ Cl	led (Check napter 15 Po a Foreign I napter 15 Po	Under Which one box) etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding	
☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ☐ 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			e) anization d States	defined	l in 11 U.S.C. § ed by an indivi	(Check onsumer debts,	for	☐ Debts are primarily 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.				or Check	Debtor is a if: Debtor's a to insiders all applica A plan is Acceptance	a small busin not a small b aggregate nor s or affiliates) ble boxes: being filed w ces of the pla	ncontingent li ncontingent li nconti	defined in or as defined iquidated do \$2,190,00 on.	11 U.S.C. § 101(51D). 1 in 11 U.S.C. § 101(51D). 2bts (excluding debts owed). 25 ion from one or more C. § 1126(b).
Statistical/Administrative Information ☐ Debtor estimates that funds will be avail ☐ Debtor estimates that, after any exempt puthere will be no funds available for distributions.	roperty is ex	xcluded and	administrativ		es paid,		THIS	SPACE IS F	OR COURT USE ONLY
Estimated Number of Creditors	1,000- 5,000	5,001- 10,000	10,001-	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets Story 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
Estimated Liabilities	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Strawn, Maurice R. Jr. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission 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 pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X <u>/s/ James R. Walsh PA</u> July 18, 2008 Signature of Attorney for Debtor(s) (Date) James R. Walsh PA 27901 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(1)).

B1 (Official Form 1)(1/08)

Voluntary Petition

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

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/ Maurice R. Strawn, Jr.

Signature of Debtor Maurice R. Strawn, Jr.

 ${f X}$.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 18, 2008

Date

Signature of Attorney*

X /s/ James R. Walsh PA

Signature of Attorney for Debtor(s)

James R. Walsh PA 27901

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

July 18, 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 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

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.)

Name of Debtor(s):

Strawn, Maurice R. Jr.

- ☐ 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 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 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.)

 \mathbf{X}

Date

Address

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.

United States Bankruptcy Court Western District of Pennsylvania

In re	Maurice R. Strawn, Jr.			
		Debtor(s)	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)
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]
Alleghenys Ind. Phys. 321 Main Street Johnstown, PA 15901	Alleghenys Ind. Phys. 321 Main Street Johnstown, PA 15901	Services rendered		361.00
AMEX PO Box 297812 Fort Lauderdale, FL 33329	AMEX PO Box 297812 Fort Lauderdale, FL 33329	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		11,057.00
Bank of America POB 17054 Wilmington, DE 19884	Bank of America POB 17054 Wilmington, DE 19884	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		16,278.00
Bank of America POB 17054 Wilmington, DE 19884	Bank of America POB 17054 Wilmington, DE 19884	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		4,988.00
Bank of America P.O. Box 1390 Norfolk, VA 23501	Bank of America P.O. Box 1390 Norfolk, VA 23501	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		1,287.00
Beneficial/HFC P.O. Box 1547 Chesapeake, VA 23327	Beneficial/HFC P.O. Box 1547 Chesapeake, VA 23327	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		6,674.00
Cambria Somerset Radiology 239 Main Street Suite 400 Johnstown, PA 15901	Cambria Somerset Radiology 239 Main Street Suite 400 Johnstown, PA 15901	Services rendered		480.00
Chase 800 Brooksedge Blvd. Westerville, OH 43081	Chase 800 Brooksedge Blvd. Westerville, OH 43081	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		7,507.00

B4 (Offi	cial Form 4) (12/07) -	Cont.
In re	Maurice R Stray	wn I

Case No.

Debtor(s)

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]
Chase/CC P.O. Box 15678 Wilmington, DE 19850	Chase/CC P.O. Box 15678 Wilmington, DE 19850	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		3,798.00
Conemaugh Emergency Phys. Group P.O. Box 700 Indiana, PA 15701	Conemaugh Emergency Phys. Group P.O. Box 700 Indiana, PA 15701	Services rendered		281.00
Conemaugh Health Initiatives 1086 Franklin Street Johnstown, PA 15905	Conemaugh Health Initiatives 1086 Franklin Street Johnstown, PA 15905	Services rendered		208.00
Conemaugh Hospital 1086 Franklin Street Johnstown, PA 15905	Conemaugh Hospital 1086 Franklin Street Johnstown, PA 15905	Services rendered		10,367.00
First Commonwealth Bank 654 Philadelphia Street P.O. Box 400 Indiana, PA 15701-0400	First Commonwealth Bank 654 Philadelphia Street P.O. Box 400 Indiana, PA 15701-0400	Line of Credit		13,000.00
GEMB/Lowes P.O. Box 981064 El Paso, TX 79998	GEMB/Lowes P.O. Box 981064 El Paso, TX 79998	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		1,601.00
Heart Group of Laurel 1020 Franklin Street Johnstown, PA 15905	Heart Group of Laurel 1020 Franklin Street Johnstown, PA 15905	Services rendered		50.00
HFC P.O. Box 1547 Chesapeake, VA 23327	HFC P.O. Box 1547 Chesapeake, VA 23327	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		9,405.00
LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603	LVNV Funding LLC P.O. Box 10497 Greenville, SC 29603	Advances taken on personal credit card on behalf of Zamias North Fork, Inc.		372.00

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	Maurice R. Strawn, Jr.	Case No.	
	Debtor(s)		

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, **Maurice R. Strawn, Jr.**, 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	July 18, 2008	Signature	/s/ Maurice R. Strawn, Jr.
			Maurice R. Strawn, Jr.
			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.

United States Bankruptcy Court Western District of Pennsylvania

In re	Maurice R. Strawn, Jr.		Case No.	
		Debtor(s)	Chapter	11
	VE	RIFICATION OF CREDITOR M	ATRIX	
Γhe ab	ove-named Debtor hereby verifi	ies that the attached list of creditors is true and corre	ect to the best	of his/her knowledge.
Date:	July 18, 2008	/s/ Maurice R. Strawn, Jr.		
		Maurice R. Strawn, Jr.		

Signature of Debtor

1st Summit Bank 125 Donald Lane P.O. Box 5480 Johnstown, PA 15904

Alleghenys Ind. Phys. 321 Main Street Johnstown, PA 15901

Americas Servicing Co. 7485 New Horizon Way Frederick, MD 21703

AMEX PO Box 297812 Fort Lauderdale, FL 33329

Bank of America P.O. Box 1390 Norfolk, VA 23501

Bank of America POB 17054 Wilmington, DE 19884

Beneficial/HFC P.O. Box 1547 Chesapeake, VA 23327

Cambria Somerset Radiology 239 Main Street Suite 400 Johnstown, PA 15901

Chase 800 Brooksedge Blvd. Westerville, OH 43081

Chase/CC P.O. Box 15678 Wilmington, DE 19850

CitiFinancial P.O. Box 6931 The Lakes, NV 88901-6931

Conemaugh Emergency Phys. Group P.O. Box 700 Indiana, PA 15701

Conemaugh Health Initiatives 1086 Franklin Street Johnstown, PA 15905 Conemaugh Hospital 1086 Franklin Street Johnstown, PA 15905

First Commonwealth Bank 654 Philadelphia Street P.O. Box 400 Indiana, PA 15701-0400

GEMB/Lowes P.O. Box 981064 El Paso, TX 79998

Heart Group of Laurel 1020 Franklin Street Johnstown, PA 15905

HFC P.O. Box 1547 Chesapeake, VA 23327

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

NCO Financial Systems E. Abrahamson & Assoc. 1729 Pittsburgh Avenue Scranton, PA 18505