

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

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Anderson Physical Therapy Etc., PC</b>	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. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>25-1753996</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): <b>1422 Liberty Street Franklin, PA</b>	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code <b>16323</b>	ZIP Code
County of Residence or of the Principal Place of Business: <b>Venango</b>	County of Residence or of the Principal Place of Business:
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):

<p align="center"><b>Type of Debtor</b> (Form of Organization) (Check one box)</p> <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" 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.)	<p align="center"><b>Nature of Business</b> (Check one box)</p> <input checked="" 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 type="checkbox"/> Other <hr/> <p align="center"><b>Tax-Exempt Entity</b> (Check box, if applicable)</p> <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<p align="center"><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)</p> <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 <hr/> <p align="center"><b>Nature of Debts</b> (Check one box)</p> <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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<p align="center"><b>Filing Fee</b> (Check one box)</p> <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.	<p align="center"><b>Chapter 11 Debtors</b></p> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). 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 type="checkbox"/> 1-49	<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000
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**Estimated Assets**

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

<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input checked="" type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion
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THIS SPACE IS FOR COURT USE ONLY

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>Anderson Physical Therapy Etc., PC</b>
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**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location Where Filed: <b>- None -</b>	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: <b>- None -</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;"><b>Exhibit A</b></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;"><b>Exhibit B</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><b>X</b> _____ 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):  
**Anderson Physical Therapy Etc., PC**

**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** \_\_\_\_\_  
Signature of Debtor

**X** \_\_\_\_\_  
Signature of Joint Debtor

\_\_\_\_\_  
Telephone Number (If not represented by attorney)

\_\_\_\_\_  
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/ Michael Kaminski  
Signature of Attorney for Debtor(s)

Michael Kaminski PA I.D. NO. 53493  
Printed Name of Attorney for Debtor(s)

Blumling & Gusky, LLP  
Firm Name

436 Seventh Avenue  
1200 Koppers Building  
Pittsburgh, PA 15219-1818

\_\_\_\_\_  
Address

Email: mkaminski@blumlinggusky.com  
412-227-2500 Fax: 412-227-2050

\_\_\_\_\_  
Telephone Number

January 18, 2011  
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** /s/ Daniel Hauptman  
Signature of Authorized Individual

Daniel Hauptman  
Printed Name of Authorized Individual

President  
Title of Authorized Individual

January 18, 2011  
Date

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

In re Anderson Physical Therapy Etc., PC

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>
Advanta PO Box 9217 Old Bethpage, NY 11804	Advanta PO Box 9217 Old Bethpage, NY 11804	Credit Card		3,283.25
Bankcard Services PO Box 4477 Beaverton, OR 97076-4477	Bankcard Services PO Box 4477 Beaverton, OR 97076-4477	Credit Card		8,222.33
BMS Reimbursement Mgmt 1220 Dewey Way Suite E Upland, CA 91786	BMS Reimbursement Mgmt 1220 Dewey Way Suite E Upland, CA 91786	Commercial Acct		62,666.88
Capitol One Capital One Bank (USA) N.A. Po Box 71083 Charlotte, NC 28272-1083	Capitol One Capital One Bank (USA) N.A. Po Box 71083 Charlotte, NC 28272-1083	Credit Card		13,586.56
Citizens Bank Commercial Loan Operations PO Box 42004 Providence, RI 02940-2004	Citizens Bank Commercial Loan Operations PO Box 42004 Providence, RI 02940-2004	Loan - Commercial		63,895.67
Citizens Bank PO Box 9665 Providence, RI 02940-9665	Citizens Bank PO Box 9665 Providence, RI 02940-9665	Credit Card		5,505.91
Colleen Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Colleen Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Loan - stock purchase	Disputed Subject to Setoff	230,000.00
Colleen Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Colleen Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Loan - stock purchase	Disputed Subject to Setoff	172,080.42
Donation Hill Partnership 761 W. Indies Dr Ramrod Key, FL 33042	Donation Hill Partnership 761 W. Indies Dr Ramrod Key, FL 33042	Rents - Office		4,216.00
Donation Hill Partnership 761 W. Indies Dr Ramrod Key, FL 33042	Donation Hill Partnership 761 W. Indies Dr Ramrod Key, FL 33042	Rents - Office		4,200.00
GM Business Card PO Box 15298 Wilmington, DE 19850-5298	GM Business Card PO Box 15298 Wilmington, DE 19850-5298	Credit Card		23,221.96

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <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>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Hill Barth & King LLC 15942 Conneaut Lake Road Meadville, PA 16335	Hill Barth & King LLC 15942 Conneaut Lake Road Meadville, PA 16335	Professional Fees - Acct		5,717.00
Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Taxes - Federal Withholding Taxes - 4th qtr 2010		7,255.18
Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Taxes - Federal Withholding Taxes - 3rd qtr 2010		50,500.85
Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Internal Revenue Service 220 S Main St Rm 201 Butler, PA 16001	Taxes - Federal Withholding Taxes - 2nd qtr 2010		39,366.22
Ohio Casualty 9450 Seward Road Fairfield, OH 45014-5456	Ohio Casualty 9450 Seward Road Fairfield, OH 45014-5456	Insurance - Business		7,776.00
PNC Bank PO Box 34077 Pittsburgh, PA 15230-7777	PNC Bank PO Box 34077 Pittsburgh, PA 15230-7777	Loan - Commercial		220,704.41
PNC Bank PO Box 348777 Pittsburgh, PA 15230-7777	PNC Bank PO Box 348777 Pittsburgh, PA 15230-7777	Line of Credit		99,173.78
Thomas B Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Thomas B Anderson 761 W. Indies Dr Ramrod Key, FL 33042	Anderson - Insurance		10,987.77
UPMC UPMC Health Network PO Box 371842 Pittsburgh, PA 15250-7842	UPMC UPMC Health Network PO Box 371842 Pittsburgh, PA 15250-7842	Insurance - Health - Employee Benefits		10,799.30

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

I, the President 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 January 18, 2011Signature /s/ Daniel Hauptman

**Daniel Hauptman**  
President

*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.

Ac Rental  
PO Box 763  
Cranberry, PA 16319-0763

Advanta  
PO Box 9217  
Old Bethpage, NY 11804

Aflac  
1932 Wynnton Road  
Columbus, GA 31999-0001

Anderson Physical Therapy  
761 W. Indies Dr  
Ramrod Key, FL 33042

Armstrong  
437 North Main St  
Butler, PA 16001

AT&T  
PO Box 1809  
Paramus, NJ 07653-1809

Bankcard Services  
PO Box 4477  
Beaverton, OR 97076-4477

BMS Reimbursement Mgmt  
1220 Dewey Way  
Suite E  
Upland, CA 91786

Boetger & Associates  
1030 State St.  
Suite 2  
Erie, PA 16501

Capitol One  
Capital One Bank (USA) N.A.  
Po Box 71083  
Charlotte, NC 28272-1083

Citizens Bank  
PO Box 9665  
Providence, RI 02940-9665

Citizens Bank  
Commercial Loan Operations  
PO Box 42004  
Providence, RI 02940-2004

City of Franklin  
430 Thirteenth St  
Franklin, PA 16323

Colleen Anderson  
761 W. Indies Dr  
Ramrod Key, FL 33042

Comcast  
PO Box 3001  
Southeastern, PA 19398-3001

Cranberry Twp  
PO Box 378  
Seneca, PA 16346

Dell Financial  
PO Box 81577  
Austin, TX 78708-1577

Donation Hill  
761 W. Indies Drive  
Ramroad Key, FL 33042

Donation Hill Partnership  
761 W. Indies Drive  
Ramroad Key, FL 33042

Dynatronics  
7030 Park Centre Drive  
Salt Lake City, UT 84121

Empi  
PO Box 660154  
Dallas, TX 75266-0154

Fine Print  
287 Chestnut Street  
Meadville, PA 16335

First Natl Bank  
4140 E State St  
Hermitage, PA 16148

GM Business Card  
PO Box 15298  
Wilmington, DE 19850-5298

Harrington Industrial Laundry  
3854 West 20th Street  
Erie, PA 16505

Hill Barth & King LLC  
15942 Conneaut Lake Road  
Meadville, PA 16335

Internal Revenue Service  
220 S Main St  
Rm 201  
Butler, PA 16001

Lorjes LLC  
1422 Liberty St.  
Franklin, PA 16323

Lorjes, LLC  
1422 Liberty Street  
Franklin, PA 16323

Manufacturer & Business  
2171 West 38th St  
Erie, PA 16508

Mastovich Innovative Business Sol  
711 Magnolia Lane  
Cranberry TWP, PA 16066

MBAIP  
PO Box 535194  
Pittsburgh, PA 15253-5194

McCreary's Business Machines  
PO Box 430 Rt 338  
Knox, PA 16232

National Fuel  
1100 State St  
Erie, PA 16501

Northwest Savings Bank  
PO Box 788  
Warren, PA 16365

Ohio Casualty  
9450 Seward Road  
Fairfield, OH 45014-5456

Penelec  
76 S Main St  
A-RPC  
Akron, OH 44308-1890

Pennsylvania American Water  
PO Box 578  
Alton, IL 62002-0578

PNC Bank  
PO Box 348777  
Pittsburgh, PA 15230-7777

PNC Bank  
PO Box 34077  
Pittsburgh, PA 15230-7777

Post Office Box - Seneca  
130 Meadow Rd  
Seneca, PA 16346

Premium Financing Specialists  
100 North Parkway  
Worcester, MA 01605

Quill  
PO Box 37600  
Philadelphia, PA 19101-0600

Rose Alexatos  
18614 Cussewago Road  
Meadville, PA 16335

The Knights of Columbus  
1435 Liberty Street  
Franklin, PA 16323

Thomas B Anderson  
761 W. Indies Dr  
Ramrod Key, FL 33042

Trans World Systems  
24890 Network Place  
Chicago, IL 60673-1248

Tucker Arensberg  
1500 One PPG Place  
Pittsburgh, PA 15222

UPMC  
UPMC Health Network  
PO Box 371842  
Pittsburgh, PA 15250-7842

Veolia  
6330 Route 219  
Brockway, PA 15824

Verizon  
PO Box 15026  
Albany, NY 12212-5026

Vernon Twp Sanitary Auth  
16678 McMath Ave  
Meadville, PA 16335

Vision Benefits  
300 Wayman Road  
Pittsburgh, PA 15236-1588

Women's Health Center  
602 W. Central Avenue, Suite A  
Titusville, PA 16354

Womens Health Center  
602 W Central Ave  
Suite A  
Titusville, PA 16354

Woods Computer Consulting  
1408 Liberty St  
Franklin, PA 16323