

PHILLIP JOSEPH KLOBER  
326 NO SPRINGFIELD  
SPRINGFIELD TN 37172

ANESTHESIA SVC  
C/O AFFILIATED CREDITORS  
300C PEABODY ST  
NASHVILLE TN 37210

CONTESSA BRIDAL/TIFFANYS  
C/O BENJIMAN & WILLIAMS  
249 MAIN ST  
EAST SETAUKET NY 11733

EVELYN DOLORES KLOBER  
326 NO. WALNUT  
SPRINGFIELD TN 37172

AT&T  
PO BOX 78628  
PHOENIX AZ 85062

DESTIN REG IMAGING CTR  
PO BOX DRAWER 6927  
MIRAMAR BEACH FL 32550

STEVEN L. LEFKOVITZ  
LEFKOVITZ AND LEFKOVITZ  
618 CHURCH STREET  
SUITE 410  
NASHVILLE, TN 37219-2321

AT&T  
C/O GC SVCS  
PO BOX 2667  
HOUSTON TX 77252

DISCOVER CARD  
PO BOX 15251  
WILMINGTON DE 19886

ACCOUNTS REC MGMT  
PO BOX 638  
PARIS TN 38242

BAPTIST AMBTRY SURG CTR  
312 21ST AVE NO  
NASHVILLE TN 37236

EMME BRIDAL  
13003 SW FREEWAY #110  
STAFFORD TX 77477

ADVANTA  
C/O CALVARY  
PO BOX 1030  
HAWTHORNE NY 10532

BAPTIST AMBTRY SURG CTR  
C/O NASH ADJ BUR  
PO BOX 198988  
NASHVILLE TN 37219

FAIRFIELD ACCEPTANCE  
C/O CONCORD SVC CORP  
4725 NO SCOTTSDALE #300  
SCOTTSDALE AZ 85251

AFIL NEUROLOG SPINAL SCAN  
C/O ASSOC BUS CONS  
314 BLUEBIRD DR  
GOODLETTSVILLE TN 37072

BELLSOUTH  
301 W BAY ST #12DD1  
JACKSONVILLE FL 32202

FARMERS & MERCHANTS BK  
3519 TOM AUSTIN HWY  
SPRINGFIELD TN 37172

AMERICAN GENERAL  
2122 GALLATIN PK NO  
MADISON TN 37115

CALVARY INVESTMENTS  
PO BOX 1  
KNOXVILLE TN 37901

FARMERS & MERCHANTS BK  
C/O HARDIN, ROBERT W ESQ  
PO BOX 866  
RUSELLVILLE AR 72811

ANESTHESIA MED GRP  
PO BOX 440234  
NASHVILLE TN 37244

CENTENNIAL MED CTR  
PO BOX 402547  
ATLANTA GA 30384

HEALTHSOUTH RBO  
C/O FHS  
9701 METROPOLITAN CT #B  
RICHMOND VA 23236

ANESTHESIA MED GRP  
C/O NASH ADJ BUR  
PO BOX 198988  
NASHVILLE TN 37219

CITI CARD  
PO BOX 8105  
SO HACKENSACK NJ 07606

HEART GROUP  
PO BOX 440556  
NASHVILLE TN 37244

ANESTHESIA SVC  
PO BOX 440210  
NASHVILLE TN 37244

CITIBANK  
C/O RICHARDSON, JOHN ESQ  
403A MADISON ST  
CLARKSVILLE TN 37040

IMPRESSION BRIDAL  
4850 WRIGHT RD #180  
STAFFORD TX 77477

IRS  
801 BROADWAY MDP146  
NASHVILLE TN 37203

NORTHCREST MED CTR  
C/O ACUSOURCE  
PO BOX 189  
GALLATIN TN 37066

SACRED HEART HOSP  
PO BOX 1350  
PENSACOLA FL 32591

IRS  
C/O US ATTORNEYS OFC  
110 9TH AVE NO #A961  
NASHVILLE TN 37203

NORTHCREST MED CTR  
C/O EDWARDS, DAVID ESQ  
PO BOX 458  
PARIS TN 38242

SACRED HEART HOSP  
C/O CSI  
PO BOX 1431  
PENSACOLA FL 32591

IRS  
PO BOX 21126  
PHILADELPHIA PA 19114

NORTHCREST MED CTR  
C/O MID SO CRED BUR  
PO BOX 1567  
PARIS TN 38242

SAKS 5TH AVE  
C/O RETAIL RECOVERY SVC  
190 MOORE ST #300  
HACKENSACK NJ 07601

IRS MDP 146  
801 BROADWAY  
NASHVILLE TN 37203

NORTHCREST MEDICAL CTR  
PO BOX 2153  
BIRMINGHAM AL 35287

SALLE MAE SVC CORP  
PO BOX 9500  
WILKES BARRE PA 18773

JK HARRIS & CO  
4995 LACROSS RD #1800  
CHARLESTON SC 29406

ORTHOSCRIPT  
PO BOX 890438  
CHARLOTTE NC 28289

SEARS CHARGE PLUS  
85 ANNEX  
ATLANTA GA 30386

LITTON MORTGAGE  
C/O WEISS SPICER  
208 ADAMS AVE  
MEMPHIS TN 38103

PANHANDLE ER PHYS EC  
C/O COLLECTION SVC  
PO BOX 1431  
PENSACOLA FL 32591

SKYLINE MED CTR  
C/O WEST ASSET MGMT  
PO BOX 2548  
SHERMAN TX 75091

MIKE BENETT FORMALS  
C/O TRANSWORLD SYS  
320 NO CEDAR BLUFF RD #240  
KNOXVILLE TN 37923

PREMIER RADIOLOGY  
PO BOX 44014  
NASHVILLE TN 37244

SO WALTON FIRE DIST  
PO BOX 5782  
DELTONA FL 32728

MITCHELL FORMAL WEAR  
PO BOX 102624  
ATLANTA GA 30368

RADIOLOGY ALLIANCE  
PO BOX 440166  
NASHVILLE TN 37244

SOUTHEASTERN ER PHYS  
C/O IMBS  
PO BOX 189053  
PLANTATION FL 33318

NEUROLOGICAL SURGEONS  
PO BOX 440409  
NASHVILLE TN 37244

RADIOLOGY ALLIANCE  
C/O FOX COLLECTION CTR  
PO BOX 528  
GOODLETTSVILLE TN 37070

SPRINGFIELD RADIOLOGY ASC  
C/O PROF ADJ SVC  
PO BOX 24850  
NASHVILLE TN 37202

NORTHCREST EMRGCY DEPT  
C/O SE ER PHYS MEMPHIS  
PO BOX 850001  
ORLANDO FL 32885

RJ YOUNG  
PO BOX 40623  
NASHVILLE TN 37204

ST THOMAS HOSPITAL  
PO BOX 501052  
ST LOUIS MO 63150

ST THOMAS OP NEUROLOGICAL  
PO BOX 742518  
CINCINNATI OH 45274

TENN ORTHOPAEDIC ALLIANCE  
PO BOX 440231  
NASHVILLE TN 37244

TENN ORTHOPAEDIC ALLIANCE  
C/O NASH ADJ BUR  
PO BOX 198988  
NASHVILLE TN 37219

TENN URGENT CARE RIVERGATE  
C/O PROF ADJ SVC  
PO BOX 24850  
NASHVILLE TN 37202

United States Bankruptcy Court
Middle District of Tennessee

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle):
KLOBER, PHILLIP JOSEPH

Name of Joint Debtor (Spouse) (Last, First, Middle):
KLOBER, EVELYN DOLORES

All Other Names used by the Debtor in the last 8 years
(include married, maiden, and trade names):
DBA KLOBER ENGINEERING SERVICES; AKA PHILIP JOSEPH KLOBER

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 other Tax ID No. (if more than one, state all)
xxx-xx-5381

Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all)
xxx-xx-3596

Street Address of Debtor (No. & Street, City, and State):
326 NO SPRINGFIELD
SPRINGFIELD, TN
ZIP Code
37172

Street Address of Joint Debtor (No. & Street, City, and State):
326 NO. WALNUT
SPRINGFIELD, TN
ZIP Code
37172

County of Residence or of the Principal Place of Business:
ROBERTSON

County of Residence or of the Principal Place of Business:
ROBERTSON

Mailing Address of Debtor (if different from street address):
ZIP Code

Mailing Address of Joint Debtor (if different from street address):
ZIP Code

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

Type of Debtor (Form of Organization)
(Choose one box)
Individual (includes Joint Debtors)
Corporation (includes LLC and LLP)
Partnership
Other (If debtor is not one of the above entities, check this box and provide the information requested below.)
State type of entity:

Nature of Business
(Choose all applicable boxes.)
Health Care Business
Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)
Railroad
Stockbroker
Commodity Broker
Clearing Bank
Nonprofit Organization qualified under 26 U.S.C. § 501(c)(3)

Chapter of Bankruptcy Code Under Which the Petition is Filed (Choose one box)
Chapter 7
Chapter 9
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

Nature of Debts (Choose one box)
Consumer/Non-Business
Business

Filing Fee (Choose 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.

Chapter 11 Debtors
Check one box:
Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).
Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).
Check if:
Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.

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.

THIS SPACE IS FOR COURT USE ONLY

Table with 10 columns: Estimated Number of Creditors. Rows for ranges: 1-49, 50-99, 100-199, 200-999, 1000-5000, 5001-10000, 10001-25000, 25001-50000, 50001-100000, OVER 100000.

Table with 9 columns: Estimated Assets. Rows for ranges: \$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, More than \$100 million.

Table with 9 columns: Estimated Debts. Rows for ranges: \$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, More than \$100 million.

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>KLOBER, PHILLIP JOSEPH</b> <b>KLOBER, EVELYN DOLORES</b>
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**Prior Bankruptcy Case Filed Within Last 8 Years** (If more than one, attach additional sheet)

Location Where Filed: <b>MIDDLE DISTRICT OF TENNESSEE</b>	Case Number: <b>3:04-BK-13331</b>	Date Filed: <b>11/02/04</b>
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**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> <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	<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.</p> <p>I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy Code.</p> <p><b>X</b> <u>/s/ STEVEN L. LEFKOVITZ</u> <span style="float: right;"><u>May 12, 2006</u></span>          Signature of Attorney for Debtor(s) <span style="float: right;">Date</span>  <b>STEVEN L. LEFKOVITZ 5953</b></p>
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<p style="text-align: center;"><b>Exhibit C</b></p> <p>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?</p> <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No	<p style="text-align: center;"><b>Certification Concerning Debt Counseling by Individual/Joint Debtor(s)</b></p> <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition. <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)
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**Information Regarding the Debtor (Check the Applicable Boxes)**

**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.

**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)

\_\_\_\_\_

(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.

**Voluntary Petition**

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

Name of Debtor(s):

**KLOBER, PHILLIP JOSEPH  
KLOBER, EVELYN DOLORES**

**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 §342(b) of the Bankruptcy Code.  
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ PHILLIP JOSEPH KLOBER  
Signature of Debtor **PHILLIP JOSEPH KLOBER**

**X** /s/ EVELYN DOLORES KLOBER  
Signature of Joint Debtor **EVELYN DOLORES KLOBER**

Telephone Number (If not represented by attorney)  
May 12, 2006  
Date

**Signature of Attorney**

**X** /s/ STEVEN L. LEFKOVITZ  
Signature of Attorney for Debtor(s)

STEVEN L. LEFKOVITZ 5953  
Printed Name of Attorney for Debtor(s)

LEFKOVITZ AND LEFKOVITZ  
Firm Name  
**618 CHURCH STREET  
SUITE 410  
NASHVILLE, TN 37219-2321**

Address  
  
Email: slefkovitz@lefkovitz.com  
615-256-8300 Fax: 615-250-4926  
Telephone Number  
May 12, 2006  
Date

**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.)

- I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by §1515 of title 11 are attached.
- Pursuant to §1511 of title 11, United States Code, 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 19B 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.*

**United States Bankruptcy Court  
Middle District of Tennessee**

In re PHILLIP JOSEPH KLOBER  
EVELYN DOLORES KLOBER

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>4,000.00</u>
Prior to the filing of this statement I have received.....	\$	<u>4,000.00</u>
Balance Due.....	\$	<u>0.00</u>

2. \$ 1,039.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify):

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

***Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.***

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

***Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.***

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: May 12, 2006

/s/ STEVEN L. LEFKOVITZ

**STEVEN L. LEFKOVITZ 5953**

**LEFKOVITZ AND LEFKOVITZ**

**618 CHURCH STREET**

**SUITE 410**

**NASHVILLE, TN 37219-2321**

**615-256-8300 Fax: 615-250-4926**

**slefkovitz@lefkovitz.com**

UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF TENNESSEE

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.



**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

**STEVEN L. LEFKOVITZ 5953**  
Printed Name of Attorney  
Address:  
**618 CHURCH STREET**  
**SUITE 410**  
**NASHVILLE, TN 37219-2321**  
**615-256-8300**

X **/s/ STEVEN L. LEFKOVITZ** **May 12, 2006**  
Signature of Attorney Date

**Certificate of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**PHILLIP JOSEPH KLOBER**  
**EVELYN DOLORES KLOBER**  
Printed Name of Debtor

X **/s/ PHILLIP JOSEPH KLOBER** **May 12, 2006**  
Signature of Debtor Date

Case No. (if known) \_\_\_\_\_

X **/s/ EVELYN DOLORES KLOBER** **May 12, 2006**  
Signature of Joint Debtor (if any) Date

**United States Bankruptcy Court  
Middle District of Tennessee**

In re PHILLIP JOSEPH KLOBER  
EVELYN DOLORES KLOBER

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, indicate that by stating "a minor child" and 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>
<b>IRS MDP 146 801 BROADWAY NASHVILLE TN 37203</b>	<b>IRS MDP 146 801 BROADWAY NASHVILLE TN 37203</b>	<b>DEBTORS' RESIDENCE</b>		<b>85,000.00</b>  <b>(0.00 secured)</b>
<b>SALLE MAE SVC CORP PO BOX 9500 WILKES BARRE PA 18773</b>	<b>SALLE MAE SVC CORP PO BOX 9500 WILKES BARRE PA 18773</b>			<b>53,002.30</b>
<b>ST THOMAS HOSPITAL PO BOX 501052 ST LOUIS MO 63150</b>	<b>ST THOMAS HOSPITAL PO BOX 501052 ST LOUIS MO 63150</b>	<b>#UNK \$8,710.36 #UNK \$1,175.75 #UNK \$1,226.95</b>		<b>11,113.06</b>
<b>DISCOVER CARD PO BOX 15251 WILMINGTON DE 19886</b>	<b>DISCOVER CARD PO BOX 15251 WILMINGTON DE 19886</b>	<b>#2921 \$5,803.06 #3262 \$4,877.69</b>		<b>10,680.75</b>
<b>RJ YOUNG PO BOX 40623 NASHVILLE TN 37204</b>	<b>RJ YOUNG PO BOX 40623 NASHVILLE TN 37204</b>	<b>KLOBER ENGINEERING SERVICES EQUIPMENT LEASE</b>		<b>9,004.47</b>
<b>TENN ORTHOPAEDIC ALLIANCE PO BOX 440231 NASHVILLE TN 37244</b>	<b>TENN ORTHOPAEDIC ALLIANCE PO BOX 440231 NASHVILLE TN 37244</b>			<b>8,863.65</b>
<b>IMPRESSION BRIDAL 4850 WRIGHT RD #180 STAFFORD TX 77477</b>	<b>IMPRESSION BRIDAL 4850 WRIGHT RD #180 STAFFORD TX 77477</b>	<b>SPLURGE BRIDAL BOUTIQUE</b>	<b>Contingent Unliquidated Disputed</b>	<b>8,340.47</b>
<b>SKYLINE MED CTR C/O WEST ASSET MGMT PO BOX 2548 SHERMAN, TX 75091</b>	<b>SKYLINE MED CTR C/O WEST ASSET MGMT PO BOX 2548 SHERMAN, TX 75091</b>			<b>7,311.00</b>
<b>MITCHELL FORMAL WEAR PO BOX 102624 ATLANTA GA 30368</b>	<b>MITCHELL FORMAL WEAR PO BOX 102624 ATLANTA GA 30368</b>	<b>SPLURGE BRIDAL BOUTIQUE</b>	<b>Disputed</b>	<b>6,061.69</b>
<b>EMME BRIDAL 13003 SW FREEWAY #110 STAFFORD TX 77477</b>	<b>EMME BRIDAL 13003 SW FREEWAY #110 STAFFORD TX 77477</b>	<b>SPLURGE BRIDAL BOUTIQUE</b>	<b>Contingent Unliquidated Disputed</b>	<b>3,743.10</b>

**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>
<b>CITI CARD PO BOX 8105 SO HACKENSACK NJ 07606</b>	<b>CITI CARD PO BOX 8105 SO HACKENSACK NJ 07606</b>			<b>3,467.96</b>
<b>SEARS CHARGE PLUS 85 ANNEX ATLANTA GA 30386</b>	<b>SEARS CHARGE PLUS 85 ANNEX ATLANTA GA 30386</b>			<b>3,180.13</b>
<b>CITIBANK C/O RICHARDSON, JOHN ESQ 403A MADISON ST CLARKSVILLE, TN 37040</b>	<b>CITIBANK C/O RICHARDSON, JOHN ESQ 403A MADISON ST CLARKSVILLE, TN 37040</b>			<b>3,073.24</b>
<b>ADVANTA C/O CALVARY PO BOX 1030 HAWTHORNE, NY 10532</b>	<b>ADVANTA C/O CALVARY PO BOX 1030 HAWTHORNE, NY 10532</b>			<b>2,736.43</b>
<b>ST THOMAS OP NEUROLOGICAL PO BOX 742518 CINCINNATI OH 45274</b>	<b>ST THOMAS OP NEUROLOGICAL PO BOX 742518 CINCINNATI OH 45274</b>			<b>2,578.00</b>
<b>CALVARY INVESTMENTS PO BOX 1 KNOXVILLE TN 37901</b>	<b>CALVARY INVESTMENTS PO BOX 1 KNOXVILLE TN 37901</b>			<b>2,544.98</b>
<b>JK HARRIS &amp; CO 4995 LACROSS RD #1800 CHARLESTON SC 29406</b>	<b>JK HARRIS &amp; CO 4995 LACROSS RD #1800 CHARLESTON SC 29406</b>		<b>Contingent Unliquidated Disputed</b>	<b>2,500.00</b>
<b>NEUROLOGICAL SURGEONS PO BOX 440409 NASHVILLE TN 37244</b>	<b>NEUROLOGICAL SURGEONS PO BOX 440409 NASHVILLE TN 37244</b>			<b>2,449.00</b>
<b>ANESTHESIA MED GRP PO BOX 440234 NASHVILLE TN 37244</b>	<b>ANESTHESIA MED GRP PO BOX 440234 NASHVILLE TN 37244</b>	#392012 \$1,469.00 #392013 \$900.00		<b>2,369.00</b>
<b>BAPTIST AMBTRY SURG CTR 312 21ST AVE NO NASHVILLE TN 37236</b>	<b>BAPTIST AMBTRY SURG CTR 312 21ST AVE NO NASHVILLE TN 37236</b>			<b>2,031.90</b>

In re PHILLIP JOSEPH KLOBER  
EVELYN DOLORES KLOBER

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**

I, the \_\_\_\_\_ 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 May 12, 2006

Signature /s/ PHILLIP JOSEPH KLOBER  
PHILLIP JOSEPH KLOBER  
Debtor

Date May 12, 2006

Signature /s/ EVELYN DOLORES KLOBER  
EVELYN DOLORES KLOBER  
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.

**United States Bankruptcy Court  
Middle District of Tennessee**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Debtors

Case No. \_\_\_\_\_

Chapter 11

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	AMOUNTS SCHEDULED		
			ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>290,000.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>62,021.75</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>213,860.62</b>	
E - Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>2</b>		<b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>12</b>		<b>157,059.90</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>19,488.17</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>21,264.44</b>
Total Number of Sheets of ALL Schedules		<b>25</b>			
Total Assets			<b>352,021.75</b>		
Total Liabilities				<b>370,920.52</b>	

**United States Bankruptcy Court  
Middle District of Tennessee**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**  
\_\_\_\_\_  
Debtors

Case No. \_\_\_\_\_  
Chapter 11

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)  
[Individual Debtors Only]**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

**The foregoing information is for statistical purposes only under 28 U.S.C § 159.**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE A. REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
<b>326 NO. WALNUT SPRINGFIELD, TN 37172</b>		<b>J</b>	<b>185,000.00</b>	<b>125,000.00</b>
<b>POPE CO. ARKANSAS- 40 ACRES: THE SOUTH HALF (S 1/2) OF THE SOUTH HALF (S 1/2) OF THE SOUTHEAST QUARTER (SE 1/4) OF SECTION 21, TOWNSHIP 7 NORTH, RANGE 18 WEST</b>		<b>W</b>	<b>100,000.00</b>	<b>0.00</b>
<b>FAIRFIELD GLADE TIMESHARE</b>		<b>J</b>	<b>5,000.00</b>	<b>3,860.62</b>

Sub-Total > **290,000.00** (Total of this page)

Total > **290,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>FARMERS BANK- PERSONAL CHECKING \$200</b>	<b>J</b>	<b>1,500.00</b>
		<b>REGIONS BANK- BUSINESS CHECKING \$1,300</b>		
3. Security deposits with public utilities, telephone companies, landlords, and others.		<b>FARMERS &amp; MERCHANTS BANK- DIP ACCT FROM PREVIOUS BK</b>	<b>J</b>	<b>1.75</b>
		<b>WATER 150</b>	<b>J</b>	<b>370.00</b>
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>CUMBERLAND ELECTRIC 220</b>		
		<b>2 SOFAS, 6 CHAIRS, TV CABINET, BOOKCASE, 6 TABLES, BUFFET, CHINA CABINET, FORMAL DINING TABLE &amp; CHAIRS, CURIO CABINET, 2 QUEEN BEDS &amp; MATTRESSES, 2 NIGHTSTANDS, 2 DRESSERS, 2 CHESTS, FULL BED &amp; MATTRESSES, DESK, GLASS TOP TABLE W/ CHAIRS, BAKERS RACK, WASHER &amp; DRYER, 2 DRESSING STOOLS, 3 LARGE MIRRORS, WICKER MIRROR, 2 TVs, SMALL STEREO, ANTIQUE, COMPUTER, PRINTER, COMPUTER TABLE, DESK CHAIR, VIDEO PLAYER, CHINA, FLATWARE, DISHES, GLASSES, SILVERPLATED BOWLS &amp; TRAYS, SEVEREAL BOWLS &amp; MISC. DISHES, LAMPS, LAWN MOWER, SWING</b>	<b>J</b>	<b>4,000.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>MISC. OLD COLLEGE BOOKS, ANNUALS, READING MATERIALS, MISC. PICTURES, 2 FAMILY PAINTINGS, PAINTING OF HOME, MISC. OLD RECORDS</b>	<b>J</b>	<b>500.00</b>
6. Wearing apparel.		<b>CLOTHES</b>	<b>J</b>	<b>1,000.00</b>
7. Furs and jewelry.		<b>WEDDING RINGS 1,000</b>	<b>J</b>	<b>3,000.00</b>
		<b>DINNER RING 400</b>		
		<b>WATCHES 1,000</b>		
		<b>COSTUME JEWELRY 100</b>		
		<b>FUR 500</b>		

Sub-Total > **10,371.75**  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property



In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
8. Firearms and sports, photographic, and other hobby equipment.		<b>GUN (BELONGED TO HUSBAND'S FATHER) 100 GUN 100 GOLF CLUBS 50 SEWING MACHINE 150</b>	<b>J</b>	<b>400.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>HUSBAND AND WIFE EACH HAVE THEIR OWN TERM LIFE INSURANCE POLICY THROUGH GRANGE LIFE INSURANCE.</b>	<b>J</b>	<b>0.00</b>
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.		<b>ACCOUNTS RECEIVABLE: (AMOUNT IS ESTIMATED)</b>	<b>J</b>	<b>45,000.00</b>
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			

Sub-Total > **45,400.00**  
(Total of this page)

Sheet 1 of 3 continuation sheets attached to the Schedule of Personal Property

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>1992 BUICK REGAL 500 1972 FORD RANGER 1,000 1989 CADILLAC 500</b>	<b>J</b>	<b>2,000.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.		<b>4 DESKS &amp; CHAIRS 1,000 3 BOOKCASES 225 TABLE &amp; 4 LAMPS 200 5 FILE CABINETS 2,000 MINI REF. 50 COMPUTERS &amp; PRINTERS 1,500 6 CHAIRS 300 MISC. PAPER, PENS, DRAFT SUPPLIES, ETC. 200</b>	<b>J</b>	<b>4,250.00</b>
			Sub-Total >	<b>6,250.00</b>
			(Total of this page)	

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			
31. Animals.		<b>FISH AQUARIUM</b>	<b>J</b>	<b>0.00</b>
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			

Sub-Total > **0.00**  
(Total of this page)  
Total > **62,021.75**

Sheet **3** of **3** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE C. PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

Check if debtor claims a homestead exemption that exceeds \$125,000.

- 11 U.S.C. §522(b)(2)  
 11 U.S.C. §522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b><u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u></b>			
<b>FARMERS BANK- PERSONAL CHECKING \$200</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>1,500.00</b>	<b>1,500.00</b>
<b>REGIONS BANK- BUSINESS CHECKING \$1,300</b>			
<b><u>Household Goods and Furnishings</u></b>			
<b>2 SOFAS, 6 CHAIRS, TV CABINET, BOOKCASE, 6 TABLES, BUFFET, CHINA CABINET, FORMAL DINING TABLE &amp; CHAIRS, CURIO CABINET, 2 QUEEN BEDS &amp; MATTRESSES, 2 NIGHTSTANDS, 2 DRESSERS, 2 CHESTS, FULL BED &amp; MATTRESSES, DESK, GLASS TOP TABLE W/ CHAIRS, BAKERS RACK, WASHER &amp; DRYER, 2 DRESSING STOOLS, 3 LARGE MIRRORS, WICKER MIRROR, 2 TVs, SMALL STEREO, ANTIQUE, COMPUTER, PRINTER, COMPUTER TABLE, DESK CHAIR, VIDEO PLAYER, CHINA, FLATWARE, DISHES, GLASSES, SILVERPLATED BOWLS &amp; TRAYS, SEVERAL BOWLS &amp; MISC. DISHES, LAMPS, LAWN MOWER, SWING</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>4,000.00</b>	<b>4,000.00</b>
<b><u>Wearing Apparel</u></b>			
<b>CLOTHES</b>	<b>Tenn. Code Ann. § 26-2-104</b>	<b>1,000.00</b>	<b>1,000.00</b>
<b><u>Interests in Insurance Policies</u></b>			
<b>HUSBAND AND WIFE EACH HAVE THEIR OWN TERM LIFE INSURANCE POLICY THROUGH GRANGE LIFE INSURANCE.</b>	<b>Tenn. Code Ann. § 56-7-203</b>	<b>0.00</b>	<b>0.00</b>
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>			
<b>1992 BUICK REGAL 500</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>2,000.00</b>	<b>2,000.00</b>
<b>1972 FORD RANGER 1,000</b>			
<b>1989 CADILLAC 500</b>			
<b><u>Office Equipment, Furnishings and Supplies</u></b>			
<b>4 DESKS &amp; CHAIRS 1,000</b>	<b>Tenn. Code Ann. § 26-2-111(4)</b>	<b>3,800.00</b>	<b>4,250.00</b>
<b>3 BOOKCASES 225</b>			
<b>TABLE &amp; 4 LAMPS 200</b>			
<b>5 FILE CABINETS 2,000</b>			
<b>MINI REF. 50</b>			
<b>COMPUTERS &amp; PRINTERS 1,500</b>			
<b>6 CHAIRS 300</b>			
<b>MISC. PAPER, PENS, DRAFT SUPPLIES, ETC. 200</b>			
<b><u>Animals</u></b>			
<b>FISH AQUARIUM</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>0.00</b>	<b>0.00</b>

0 continuation sheets attached to Schedule of Property Claimed as Exempt

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		H	J					
Account No. <b>0508</b> <b>Creditor #: 1</b> <b>FAIRFIELD ACCEPTANCE</b> <b>C/O CONCORD SVC CORP</b> <b>4725 NO SCOTTSDALE #300</b> <b>SCOTTSDALE, AZ 85251</b>		<b>H</b>						
							<b>3,860.62</b>	<b>0.00</b>
Account No. <b>Creditor #: 2</b> <b>IRS MDP 146</b> <b>801 BROADWAY</b> <b>NASHVILLE TN 37203</b>		<b>J</b>						
							<b>85,000.00</b>	<b>85,000.00</b>
Account No. <b>ADDITIONAL NOTICE:</b> <b>IRS MDP 146</b>								
Account No. <b>xxxxxx0080</b> <b>Creditor #: 3</b> <b>LITTON MORTGAGE</b> <b>C/O WEISS SPICER</b> <b>208 ADAMS AVE</b> <b>MEMPHIS, TN 38103</b>		<b>J</b>						
							<b>125,000.00</b>	<b>0.00</b>

0 continuation sheets attached

Subtotal  
(Total of this page)

**213,860.62**

Total  
(Report on Summary of Schedules)

**213,860.62**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

**Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

**Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

**Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(4).

**Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

**Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

**Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

**Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

**Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

**Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
		H W J C					
Account No. <b>Creditor #: 1 IRS 801 BROADWAY MDP146 NASHVILLE TN 37203</b>		<b>J</b>				<b>0.00</b>	<b>0.00</b>
Account No. <b>ADDITIONAL NOTICE: IRS</b>							
Account No.							
Account No.							
Account No.							

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal  
(Total of this page)

**0.00**

**0.00**

Total  
(Report on Summary of Schedules)

**0.00**

**0.00**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>Creditor #: 1 ACCOUNTS REC MGMT PO BOX 638 PARIS TN 38242</b>		W				204.80
Account No. 0005 <b>Creditor #: 2 ADVANTA C/O CALVARY PO BOX 1030 HAWTHORNE, NY 10532</b>		W				2,736.43
Account No. <b>Creditor #: 3 AFIL NEUROLOG SPINAL SCAN C/O ASSOC BUS CONS 314 BLUEBIRD DR GOODLETTSVILLE, TN 37072</b>		W				720.00
Account No. 2108 <b>Creditor #: 4 AMERICAN GENERAL 2122 GALLATIN PK NO MADISON TN 37115</b>		J	UNKNOWN			0.00
Subtotal (Total of this page)						3,661.23

11 continuation sheets attached



In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G U E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>Creditor #: 5 ANESTHESIA MED GRP PO BOX 440234 NASHVILLE TN 37244</b>		<b>W</b>				<b>#392012 \$1,469.00 #392013 \$900.00</b>  <b>2,369.00</b>
Account No. <b>ADDITIONAL NOTICE: ANESTHESIA MED GRP</b>						<b>ANESTHESIA MED GRP C/O NASH ADJ BUR PO BOX 198988 NASHVILLE, TN 37219</b>
Account No. <b>x1739</b> <b>Creditor #: 6 ANESTHESIA SVC PO BOX 440210 NASHVILLE TN 37244</b>		<b>J</b>				<b>810.00</b>
Account No. <b>ADDITIONAL NOTICE: ANESTHESIA SVC</b>						<b>ANESTHESIA SVC C/O AFFILIATED CREDITORS 300C PEABODY ST NASHVILLE, TN 37210</b>
Account No. <b>Creditor #: 7 AT&amp;T PO BOX 78628 PHOENIX AZ 85062</b>		<b>J</b>				<b>#3479 \$123.06 #8001 \$66.26 (SPLURGE BRIDAL BOUTIQUE)</b>  <b>789.32</b>
Sheet no. <u>1</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	<b>3,968.32</b>

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>ADDITIONAL NOTICE: AT&amp;T</b>			<b>AT&amp;T C/O GC SVCS PO BOX 2667 HOUSTON, TX 77252</b>				
Account No. <b>x5652</b> <b>Creditor #: 8 BAPTIST AMBTRY SURG CTR 312 21ST AVE NO NASHVILLE TN 37236</b>		<b>J</b>					<b>2,031.90</b>
Account No. <b>ADDITIONAL NOTICE: BAPTIST AMBTRY SURG CTR</b>			<b>BAPTIST AMBTRY SURG CTR C/O NASH ADJ BUR PO BOX 198988 NASHVILLE, TN 37219</b>				
Account No. <b>Creditor #: 9 BELLSOUTH 301 W BAY ST #12DD1 JACKSONVILLE FL 32202</b>		<b>J</b>	<b>#0472 \$216.25 (SPLURGE BRIDAL BOUTIQUE) #0479 \$UNK (KLOBER ENGINEERING) #0471 \$UNK (RESIDENCE)</b>				<b>216.25</b>
Account No. <b>Creditor #: 10 CALVARY INVESTMENTS PO BOX 1 KNOXVILLE TN 37901</b>		<b>H</b>					<b>2,544.98</b>
Subtotal (Total of this page)							<b>4,793.13</b>

Sheet no. 2 of 11 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>4056</b> <b>Creditor #: 11</b> <b>CENTENNIAL MED CTR</b> <b>PO BOX 402547</b> <b>ATLANTA GA 30384</b>	<b>J</b>					<b>392.48</b>
Account No. <b>4658</b> <b>Creditor #: 12</b> <b>CITI CARD</b> <b>PO BOX 8105</b> <b>SO HACKENSACK NJ 07606</b>	<b>H</b>					<b>3,467.96</b>
Account No. <b>1173</b> <b>Creditor #: 13</b> <b>CITIBANK</b> <b>C/O RICHARDSON, JOHN ESQ</b> <b>403A MADISON ST</b> <b>CLARKSVILLE, TN 37040</b>	<b>W</b>					<b>3,073.24</b>
Account No. <b>37</b> <b>Creditor #: 14</b> <b>CONTESSA BRIDAL/TIFFANYS</b> <b>C/O BENJIMAN &amp; WILLIAMS</b> <b>249 MAIN ST</b> <b>EAST SETAUKET, NY 11733</b>	<b>W</b>					<b>1,900.17</b>
Account No. <b>3546</b> <b>Creditor #: 15</b> <b>DESTIN REG IMAGING CTR</b> <b>PO BOX DRAWER 6927</b> <b>MIRAMAR BEACH FL 32550</b>	<b>W</b>					<b>51.39</b>
Sheet no. <b>3</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	<b>8,885.24</b>

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>Creditor #: 16 DISCOVER CARD PO BOX 15251 WILMINGTON DE 19886</b>	W	#2921	\$5,803.06				<b>10,680.75</b>
		#3262	\$4,877.69				
Account No. <b>Creditor #: 17 EMME BRIDAL 13003 SW FREEWAY #110 STAFFORD TX 77477</b>	W	<b>SPLURGE BRIDAL BOUTIQUE</b>		X	X	X	<b>3,743.10</b>
Account No. <b>Creditor #: 18 FARMERS &amp; MERCHANTS BK 3519 TOM AUSTIN HWY SPRINGFIELD TN 37172</b>	H	<b>KLOBER ENGINEERING SERVICES #3570 #7764  AMOUNT OWED IS UNKNOWN</b>					<b>0.00</b>
Account No. <b>Creditor #: 19 FARMERS &amp; MERCHANTS BK C/O HARDIN, ROBERT W ESQ PO BOX 866 RUSELLVILLE, AR 72811</b>	J	<b>DEFICIENCY OWING ON FORECLOSED PROPERTY LOCATED IN POPE CO. ARKANSAS- 40 ACRES: THE SOUTH HALF (S 1/2) OF THE SOUTH HALF (S 1/2) OF THE SOUTHEAST QUARTER (SE 1/4) OF SECTION 21, TOWNSHIP 7 NORTH, RANGE 18 WEST</b>					<b>0.00</b>
Account No. <b>0048</b> <b>Creditor #: 20 HEALTHSOUTH RBO C/O FHS 9701 METROPOLITAN CT #B RICHMOND, VA 23236</b>	W						<b>294.00</b>
Subtotal (Total of this page)							<b>14,717.85</b>

Sheet no. 4 of 11 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>4706</b> <b>Creditor #: 21</b> <b>HEART GROUP</b> <b>PO BOX 440556</b> <b>NASHVILLE TN 37244</b>		<b>W</b>				<b>25.00</b>
Account No. <b>Creditor #: 22</b> <b>IMPRESSION BRIDAL</b> <b>4850 WRIGHT RD #180</b> <b>STAFFORD TX 77477</b>		<b>W</b>		<b>X</b>	<b>X</b>	<b>8,340.47</b>
Account No. <b>Creditor #: 23</b> <b>JK HARRIS &amp; CO</b> <b>4995 LACROSS RD #1800</b> <b>CHARLESTON SC 29406</b>		<b>J</b>		<b>X</b>	<b>X</b>	<b>2,500.00</b>
Account No. <b>1354</b> <b>Creditor #: 24</b> <b>MIKE BENETT FORMALS</b> <b>C/O TRANSWORLD SYS</b> <b>320 NO CEDAR BLUFF RD #240</b> <b>KNOXVILLE, TN 37923</b>		<b>W</b>			<b>X</b>	<b>1,311.41</b>
Account No. <b>Creditor #: 25</b> <b>MITCHELL FORMAL WEAR</b> <b>PO BOX 102624</b> <b>ATLANTA GA 30368</b>		<b>W</b>			<b>X</b>	<b>6,061.69</b>
Subtotal (Total of this page)						<b>18,238.57</b>

Sheet no. 5 of 11 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors  
**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community		D I S P U T E D	A M O U N T O F C L A I M
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		
Account No. <b>Creditor #: 26 NEUROLOGICAL SURGEONS PO BOX 440409 NASHVILLE TN 37244</b>		W			<b>2,449.00</b>
Account No. <b>4569</b> <b>Creditor #: 27 NORTHCREST EMRGCY DEPT C/O SE ER PHYS MEMPHIS PO BOX 850001 ORLANDO, FL 32885</b>		W			<b>100.00</b>
Account No. <b>Creditor #: 28 NORTHCREST MEDICAL CTR PO BOX 2153 BIRMINGHAM AL 35287</b>		W	<b>#0404 \$339.81 #9214 \$100.00 #7177 \$204.80 #5419 \$176.00 #4064 \$160.17</b>		<b>0.00</b>
Account No. <b>ADDITIONAL NOTICE: NORTHCREST MEDICAL CTR</b>			<b>NORTHCREST MED CTR C/O ACUSOURCE PO BOX 189 GALLATIN, TN 37066</b>		
Account No. <b>ADDITIONAL NOTICE: NORTHCREST MEDICAL CTR</b>			<b>NORTHCREST MED CTR C/O EDWARDS, DAVID ESQ PO BOX 458 PARIS, TN 38242</b>		
Sheet no. <b>6</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)	<b>2,549.00</b>

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>ADDITIONAL NOTICE: NORTHCREST MEDICAL CTR</b>						
		<b>NORTHCREST MED CTR C/O MID SO CRED BUR PO BOX 1567 PARIS, TN 38242</b>				
Account No. <b>4265</b>						
<b>Creditor #: 29 ORTHOSCRIPT PO BOX 890438 CHARLOTTE NC 28289</b>		<b>W</b>				<b>45.00</b>
Account No.						
<b>Creditor #: 30 ORTHOSCRIPT PO BOX 890438 CHARLOTTE NC 28289</b>		<b>W</b>				<b>45.00</b>
Account No. <b>4233</b>						
<b>Creditor #: 31 PANHANDLE ER PHYS EC C/O COLLECTION SVC PO BOX 1431 PENSACOLA, FL 32591</b>		<b>W</b>				<b>199.00</b>
Account No. <b>x3653</b>						
<b>Creditor #: 32 PREMIER RADIOLOGY PO BOX 44014 NASHVILLE TN 37244</b>		<b>J</b>				<b>314.00</b>
Subtotal (Total of this page)						<b>603.00</b>
Sheet no. <u>7</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. <b>Creditor #: 33 RADIOLOGY ALLIANCE PO BOX 440166 NASHVILLE TN 37244</b>		<b>W</b>	<b>#9608 \$180.00 #2261 \$472.00</b>				<b>652.00</b>	
Account No. <b>ADDITIONAL NOTICE: RADIOLOGY ALLIANCE</b>			<b>RADIOLOGY ALLIANCE C/O FOX COLLECTION CTR PO BOX 528 GOODLETTSVILLE, TN 37070</b>					
Account No. <b>J706</b> <b>Creditor #: 34 RJ YOUNG PO BOX 40623 NASHVILLE TN 37204</b>		<b>H</b>	<b>KLOBER ENGINEERING SERVICES EQUIPMENT LEASE</b>				<b>9,004.47</b>	
Account No. <b>3784</b> <b>Creditor #: 35 SACRED HEART HOSP PO BOX 1350 PENSACOLA FL 32591</b>		<b>W</b>					<b>1,665.00</b>	
Account No. <b>ADDITIONAL NOTICE: SACRED HEART HOSP</b>			<b>SACRED HEART HOSP C/O CSI PO BOX 1431 PENSACOLA, FL 32591</b>					
Sheet no. <b>8</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	<b>11,321.47</b>



In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>0780</b> <b>Creditor #: 36</b> <b>SAKS 5TH AVE</b> <b>C/O RETAIL RECOVERY SVC</b> <b>190 MOORE ST #300</b> <b>HACKENSACK, NJ 07601</b>		<b>W</b>				<b>950.45</b>
Account No. <b>8101</b> <b>Creditor #: 37</b> <b>SALLE MAE SVC CORP</b> <b>PO BOX 9500</b> <b>WILKES BARRE PA 18773</b>		<b>H</b>				<b>53,002.30</b>
Account No. <b>9595</b> <b>Creditor #: 38</b> <b>SEARS CHARGE PLUS</b> <b>85 ANNEX</b> <b>ATLANTA GA 30386</b>		<b>H</b>				<b>3,180.13</b>
Account No. <b>xxx3193</b> <b>Creditor #: 39</b> <b>SKYLINE MED CTR</b> <b>C/O WEST ASSET MGMT</b> <b>PO BOX 2548</b> <b>SHERMAN, TX 75091</b>		<b>J</b>				<b>7,311.00</b>
Account No. <b>1627</b> <b>Creditor #: 40</b> <b>SO WALTON FIRE DIST</b> <b>PO BOX 5782</b> <b>DELTONA FL 32728</b>		<b>W</b>				<b>299.00</b>
Sheet no. <b>9</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	<b>64,742.88</b>

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		H W J C					
Account No. <b>6061</b> <b>Creditor #: 41</b> <b>SOUTHEASTERN ER PHYS</b> <b>C/O IMBS</b> <b>PO BOX 189053</b> <b>PLANTATION, FL 33318</b>		<b>W</b>					<b>500.00</b>
Account No. <b>Creditor #: 42</b> <b>SPRINGFIELD RADIOLOGY ASC</b> <b>C/O PROF ADJ SVC</b> <b>PO BOX 24850</b> <b>NASHVILLE, TN 37202</b>		<b>W</b>	<b>#5602 \$34.00</b> <b>#5419 \$333.00</b>				<b>367.00</b>
Account No. <b>Creditor #: 43</b> <b>ST THOMAS HOSPITAL</b> <b>PO BOX 501052</b> <b>ST LOUIS MO 63150</b>		<b>J</b>	<b>#UNK \$8,710.36</b> <b>#UNK \$1,175.75</b> <b>#UNK \$1,226.95</b>				<b>11,113.06</b>
Account No. <b>Creditor #: 44</b> <b>ST THOMAS OP NEUROLOGICAL</b> <b>PO BOX 742518</b> <b>CINCINNATI OH 45274</b>		<b>W</b>					<b>2,578.00</b>
Account No. <b>9311</b> <b>Creditor #: 45</b> <b>TENN ORTHOPAEDIC ALLIANCE</b> <b>PO BOX 440231</b> <b>NASHVILLE TN 37244</b>		<b>W</b>					<b>8,863.65</b>
Subtotal (Total of this page)							<b>23,421.71</b>

Sheet no. 10 of 11 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>ADDITIONAL NOTICE: TENN ORTHOPAEDIC ALLIANCE</b>						
		<b>TENN ORTHOPAEDIC ALLIANCE C/O NASH ADJ BUR PO BOX 198988 NASHVILLE, TN 37219</b>				
Account No. <b>4574</b> <b>Creditor #: 46 TENN URGENT CARE RIVERGATE C/O PROF ADJ SVC PO BOX 24850 NASHVILLE, TN 37202</b>		<b>W</b>				<b>157.50</b>
Account No.						
Account No.						
Account No.						

Sheet no. 11 of 11 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page)

**157.50**

Total  
(Report on Summary of Schedules)

**157,059.90**

In re **PHILLIP JOSEPH KLOBER,  
EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
<b>RJ YOUNG PO BOX 40623 NASHVILLE TN 37204</b>	<b>STRAIGHT LEASE OF PLOTTER MACHINE USED FOR BLUEPRINTS</b>

0 continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases



In re **PHILLIP JOSEPH KLOBER**  
**EVELYN DOLORES KLOBER**

Debtor(s)

Case No. \_\_\_\_\_

**SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status:  <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP: <b>None.</b>	AGE:
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>OWNER</b>	
Name of Employer	<b>KLOBER ENGINEERING SERVICES</b>	
How long employed	<b>09/22/02 TO PRESENT</b>	
Address of Employer	<b>402 CENTRAL AVE. E SPRINGFIELD, TN 37172</b>	

INCOME: (Estimate of average monthly income)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>0.00</u>	\$ <u>0.00</u>
2. Estimate monthly overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
3. SUBTOTAL	\$ <u>0.00</u>	\$ <u>0.00</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>0.00</u>	\$ <u>0.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>0.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>0.00</u>	\$ <u>0.00</u>
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>0.00</u>	\$ <u>0.00</u>
7. Regular income from operation of business or profession or farm. (Attach detailed statement)	\$ <u>19,488.17</u>	\$ <u>0.00</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
11. Social security or other government assistance (Specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
13. Other monthly income (Specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ <u>19,488.17</u>	\$ <u>0.00</u>
15. TOTAL MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ <u>19,488.17</u>	\$ <u>0.00</u>
16. TOTAL COMBINED MONTHLY INCOME: \$ <u>19,488.17</u>		(Report also on Summary of Schedules)
17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:		

In re **PHILLIP JOSEPH KLOBER**  
**EVELYN DOLORES KLOBER**

Case No. \_\_\_\_\_

Debtor(s)

## SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)		\$ <u>1,180.00</u>
a. Are real estate taxes included?	Yes <u>    </u> No <u>X</u>	
b. Is property insurance included?	Yes <u>    </u> No <u>X</u>	
2. Utilities:		
a. Electricity and heating fuel		\$ <u>290.00</u>
b. Water and sewer		\$ <u>60.00</u>
c. Telephone		\$ <u>90.00</u>
d. Other <u>CABLE</u>		\$ <u>30.00</u>
3. Home maintenance (repairs and upkeep)		\$ <u>0.00</u>
4. Food		\$ <u>400.00</u>
5. Clothing		\$ <u>125.00</u>
6. Laundry and dry cleaning		\$ <u>10.00</u>
7. Medical and dental expenses		\$ <u>150.00</u>
8. Transportation (not including car payments)		\$ <u>200.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		\$ <u>0.00</u>
10. Charitable contributions		\$ <u>100.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's		\$ <u>105.00</u>
b. Life		\$ <u>420.00</u>
c. Health		\$ <u>350.00</u>
d. Auto		\$ <u>170.00</u>
e. Other _____		\$ <u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <u>REAL ESTATE</u>		\$ <u>75.00</u>
13. Installment payments: (In chapter 11, 12 and 13 cases, do not list payments to be included in the plan.)		
a. Auto		\$ <u>0.00</u>
b. Other _____		\$ <u>0.00</u>
c. Other _____		\$ <u>0.00</u>
d. Other _____		\$ <u>0.00</u>
14. Alimony, maintenance, and support paid to others		\$ <u>0.00</u>
15. Payments for support of additional dependents not living at your home		\$ <u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$ <u>0.00</u>
17. Other <u>BUSINESS EXPENSES</u>		\$ <u>17,509.58</u>
Other _____		\$ <u>0.00</u>
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)		<b>\$ <u>21,264.44</u></b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Total monthly income from Line 16 of Schedule I		\$ <u>19,488.17</u>
b. Total monthly expenses from Line 18 above		\$ <u>21,264.44</u>
c. Monthly net income (a. minus b.)		\$ <u>-1,776.27</u>

**United States Bankruptcy Court  
Middle District of Tennessee**

In re **PHILLIP JOSEPH KLOBER  
EVELYN DOLORES KLOBER**

Debtor(s)

Case No. \_\_\_\_\_

Chapter **11**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **27** sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.

Date **May 12, 2006**

Signature **/s/ PHILLIP JOSEPH KLOBER  
PHILLIP JOSEPH KLOBER**  
Debtor

Date **May 12, 2006**

Signature **/s/ EVELYN DOLORES KLOBER  
EVELYN DOLORES KLOBER**  
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.



**United States Bankruptcy Court  
Middle District of Tennessee**

In re **PHILLIP JOSEPH KLOBER  
EVELYN DOLORES KLOBER**

Debtor(s)

Case No. \_\_\_\_\_  
Chapter **11**

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$56,194.00</b>	<b>2002: GROSS INCOME AS PER FEDERAL TAX RETURN</b>
<b>\$122,725.00</b>	<b>2003: GROSS INCOME AS PER FEDERAL TAX RETURN</b>
<b>\$246,330.00</b>	<b>2004: GROSS INCOME AS PER FEDERAL TAX RETURN</b>
<b>\$233,858.00</b>	<b>2005: GROSS INCOME AS PER FEDERAL TAX RETURN</b>

**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

**3. Payments to creditors**

None  *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR <b>TO BE SUPPLIED</b>	DATES OF PAYMENTS	AMOUNT PAID <b>\$0.00</b>	AMOUNT STILL OWING <b>\$0.00</b>
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None  b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	---------------------------------	---	--------------------

None  c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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**4. Suits and administrative proceedings, executions, garnishments and attachments**

None  a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER <b>FARMERS &amp; MERCHANTS BANK -v- PHILLIP and EVELYN KLOBER and DELENA M. WRIGHT</b>	NATURE OF PROCEEDING <b>FORECLOSURE COMPLAINT</b>	COURT OR AGENCY AND LOCATION <b>POPE COUNTY ARKANSAS CIRCUIT COURT</b>	STATUS OR DISPOSITION <b>DEFAULT JUDGMENT</b>
<b>DOCKET # CV-2004-396</b>			

None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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### 5. Repossessions, foreclosures and returns

- None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
<b>FARMERS &amp; MERCHANTS BK 3519 TOM AUSTIN HWY SPRINGFIELD TN 37172</b>		<b>FORECLOSED POPE CO PROPERTY W/IN THE LAST YEAR</b>

### 6. Assignments and receiverships

- None  a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------	-----------------------	-----------------------------------

- None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

### 7. Gifts

- None  List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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### 8. Losses

- None  List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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### 9. Payments related to debt counseling or bankruptcy

- None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>LEFKOVITZ &amp; LEFKOVITZ 618 CHURCH ST., #410 NASHVILLE, TN 37219</b>	<b>NOVEMBER 2004</b>	<b>\$4,000.00 RETAINER FEE FOR THIS CH. 11 PROCEEDING</b>

### 10. Other transfers

- None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
<b>EVELYN KLOBER 326 NO. WALNUT SPRINGFIELD, TN 37172 DEBTOR</b>		<b>LESS THAN 30 DAYS PRIOR TO FILING DELENA (DEBTOR'S SISTER) TRANSFERRED THE REAL ESTATE LISTED ON SCHEDULE A OF THIS PETITION AND DESCRIBED AS THE POPE COUNTY ARKANSAS 40 ACRES OF LAND.</b>

- None  b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

- None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

- None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY

**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None  If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

None  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None  a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF  
GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18 . Nature, location and name of business

- None  a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
<b>KLOBER ENGINEERING SERVICES, LLC</b>			<b>ENGINEERING</b>	<b>03/06/98 TO 09/20/02</b>
<b>KLOBER ENGINEERING SERVICES</b>		<b>402 CENTRAL AVE. E SPRINGFIELD, TN 37172</b>	<b>ENGINEERING  HUSBAND- SOLE PROPRIETORSHIP</b>	<b>09/21/02 TO PRESENT</b>
<b>SPLURGE BRIDAL BOUTIQUE</b>				

- None  b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

### 19. Books, records and financial statements

- None  a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

- None  b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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- None  c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
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- None  d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
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### 20. Inventories

- None  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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- None  b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
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### 21 . Current Partners, Officers, Directors and Shareholders

- None  a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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- None  b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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### 22 . Former partners, officers, directors and shareholders

- None  a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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- None  b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

- None  
 If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

- None  
 If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
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**25. Pension Funds.**

- None  
 If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
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**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date May 12, 2006

Signature /s/ PHILLIP JOSEPH KLOBER  
**PHILLIP JOSEPH KLOBER**  
Debtor

Date May 12, 2006

Signature /s/ EVELYN DOLORES KLOBER  
**EVELYN DOLORES KLOBER**  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*