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| BI (Omeiai)  | rom ras   |                           | United<br>Wes                  |                                   | s Banki<br>istrict of  |                                     |                                      |   |   |                               | Voluntary   | Petition                       |
|--|---|---------------------------|--------------------------------|-----------------------------------|--|-------------------------------------|--------------------------------------|---|---|-------------------------------|---|--------------------------------|
| Name of Do<br>Allied E   | ebtor (if ind<br>lectrical (                      |                           |                                | t, Middle):                       | :  |                                     | Name                                 | of Joint De                             | ebtor (Spouse   | e) (Last, First               | , Middle):  |                                |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): |   |                           |                                |                                   | All Of (include)   | ther Names<br>de married,           | used by the J<br>maiden, and         | Joint Debtor<br>trade names             | in the last 8 years<br>):   |                               |   |                                |
| Last four dig  | e, state all)                                     | Sec. or Indi              | vidual-Taxp                    | oayer I.D.                        | (ITIN) No./  | Complete E                          | EIN Last for (if more                | our digits o                            | f Soc. Sec. or  | Individual-                   | Гахрауег I.D. (ITIN) N                                  | lo./Complete EIN               |
| Street Addre   | ess of Debto<br>alker Ave                         | •                         | Street, City,                  | and State)                        | ):   | ZID Code                            |                                      | Address of                              | f Joint Debtor  | (No. and St                   | reet, City, and State):                                 | ZID Code                       |
|  |   |                           |                                |                                   | [:   | ZIP Code<br>38106                   | ;                                    |   |   |                               |   | ZIP Code                       |
| County of R<br>Shelby  | tesidence or                                      | of the Princ              | cipal Place                    | of Busines                        | s:   |                                     |                                      | •                                       |   | •                             | ace of Business:  |                                |
| Mailing Add  | dress of Deb                                      | otor (if diffe            | rent from st                   | reet addre                        | ss):   |                                     | Mailir                               | ng Address                              | of Joint Debt   | or (if differe                | nt from street address)                                 | :                              |
|  |   |                           |                                |                                   |  | ZIP Code                            | 2                                    |   |   |                               |   | ZIP Code                       |
| Location of (if different  |   |                           |                                | r                                 |  |                                     |                                      |   |   |                               |   |                                |
|  | Type of   | f Debtor                  |                                | 1                                 | Nature   | of Business                         | 8                                    |   | Chapter   | of Bankruj                    | otcy Code Under Whi                                     | ich                            |
|  |   | rganization)<br>one box)  |                                | Ппп                               | (Check<br>alth Care Bu   | one box)                            |                                      |   |   | Petition is Fi                | iled (Check one box)                                    |                                |
|  |   |                           |                                | Sing                              | gle Asset Re   | eal Estate a                        | s defined                            | ☐ Chapt☐ Chapt☐                         |   | □ C                           | hapter 15 Petition for I                                | Recognition                    |
| ☐ Individu   | al (includes<br>ibit D on pa                      |                           |                                | in 1                              | 1 U.S.C. §   | 101 (51B)                           |                                      | Chapter 11 of a Foreign Main Proceeding |   |                               |   |                                |
| Corporat   | •   |                           | •                              | ☐ Sto                             | ckbroker   |                                     |                                      | Chapt                                   |   |                               | hapter 15 Petition for I<br>a Foreign Nonmain P         | -                              |
| ☐ Partnersl  |   |                           | ,                              |                                   | nmodity Broaring Bank  | oker                                |                                      | ☐ Chapt                                 | er 13   | OI                            | a roleigh Nomhain F                                     | loceeding                      |
| Other (If  |   |                           |                                | Oth                               | 0  |                                     |                                      |   |   |                               | e of Debts  |                                |
| check this   | s box and stat                                    | e type of enti            | ity below.)                    | -                                 |  | mpt Entity                          |                                      | D Dates                                 |   |                               | k one box)  |                                |
|  |   |                           |                                | und                               | (Check box<br>otor is a tax-<br>er Title 26 of<br>the (the Inter | of the Unite                        | ganization ed States                 | defined                                 | are primarily co<br>d in 11 U.S.C. §<br>red by an indivi-<br>onal, family, or | 3 101(8) as<br>dual primarily | busin   | s are primarily<br>ness debts. |
|  | Fil   | ling Fee (C               | heck one bo                    | x)                                |  | Check                               | one box:                             | 1                                       | Chap  | ter 11 Debt                   | ors   |                                |
| Full Filing  | g Fee attached                                    | i                         |                                |                                   |  |                                     |                                      |   | debtor as defin   |                               | C. § 101(51D).<br>J.S.C. § 101(51D).                    |                                |
| Filing Fee   | e to be paid in<br>ned application                |                           |                                |                                   |  | Check                               |                                      | a sman ousi                             | ness debtor as e  | icinica in 11 v               | 3.5.C. § 101(31D).                                      |                                |
| U  | unable to pay                                     |                           |                                | -                                 | _  |                                     |                                      |   |   |                               | cluding debts owed to insition on 4/01/13 and every thr |                                |
| _  | e waiver reque                                    | astad (a <b>nnl</b> iae   | abla ta abanta                 | r 7 individu                      | ole only) Mu   |                                     | all applicable                       |   |   |                               | •   |                                |
|  | ned application                                   |                           |                                |                                   |  | 8B.   🗖                             | Acceptances                          | of the plan w                           | this petition.<br>were solicited pr<br>S.C. § 1126(b).                        |                               | n one or more classes of c                              | reditors,                      |
| Statistical/A  |   |                           |                                | 6 11                              | 9  |                                     | 11.                                  |   |   | THIS                          | SPACE IS FOR COURT                                      | USE ONLY                       |
|  | estimates that<br>estimates that<br>Il be no fund | it, after any             | exempt pro                     | perty is ex                       | cluded and   | administra                          |                                      | es paid,                                |   |                               |   |                                |
| Estimated N  |   |                           |                                |                                   |  |                                     |                                      |   |   | 1                             |   |                                |
| 1-<br>49   | □<br>50-<br>99                                    | 100-<br>199               | 200-<br>999                    | 1,000-<br>5,000                   | 5,001-<br>10,000   | 10,001-<br>25,000                   | 25,001-<br>50,000                    | 50,001-<br>100,000                      | OVER<br>100,000   |                               |   |                                |
| Estimated A  |   | _                         |                                | _                                 |  |                                     | -                                    |   | _   | 1                             |   |                                |
| \$0 to<br>\$50,000   | \$50,001 to<br>\$100,000                          | \$100,001 to<br>\$500,000 | \$500,001<br>to \$1<br>million | \$1,000,001<br>to \$10<br>million | \$10,000,001<br>to \$50<br>million                               | \$50,000,001<br>to \$100<br>million | \$100,000,001<br>to \$500<br>million | \$500,000,001<br>to \$1 billion         |   |                               |   |                                |
| Estimated L<br>\$0 to<br>\$50,000  | \$50,001 to<br>\$100,000                          | \$100,001 to<br>\$500,000 | \$500,001<br>to \$1<br>million | \$1,000,001<br>to \$10<br>million | \$10,000,001<br>to \$50<br>million                               | \$50,000,001<br>to \$100<br>million | \$100,000,001<br>to \$500<br>million | \$500,000,001<br>to \$1 billion         |   |                               |   |                                |

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Page 2 Name of Debtor(s): Voluntary Petition Allied Electrical Contractors, Inc. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Date Filed: Name of Debtor: Case Number: Allied Electrical Contractors, LLC 10-28999 8/23/10 District: Relationship: Judge: **Western Dist of Tenn Affiliate** Jennie D. Latta Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) ☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

#### B1 (Official Form 1)(4/10)

## **Voluntary Petition**

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

Name of Debtor(s):

Allied Electrical Contractors, Inc.

#### **Signatures** Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

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

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

Signature of Debtor

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Toni Campbell Parker

Signature of Attorney for Debtor(s)

#### Toni Campbell Parker TN6984 MS4018

Printed Name of Attorney for Debtor(s)

#### Law Office of Toni Campbell Parker

Firm Name

615 Oakleaf Office Lane Suite 201 Memphis, TN 38117

Address

## Email: tparker001@bellsouth.net

901-683-0099 Fax: 866-489-7938

Telephone Number

## February 23, 2011

Date

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

#### Signature of Debtor (Corporation/Partnership)

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

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

## X /s/ Michael A. Eskridge

Signature of Authorized Individual

#### Michael A. Eskridge

Printed Name of Authorized Individual

#### President

Title of Authorized Individual

#### February 23, 2011

Date

#### Signature of a Foreign Representative

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

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

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

| _ | _ |   |  |
|---|---|---|--|
| М | ۰ | • |  |
|   |   |   |  |

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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**B4** (Official Form 4) (12/07)

## **United States Bankruptcy Court** Western District of Tennessee

| In re | Allied Electrical Contractors, Inc. |           | Case No. |    |
|-------|-------------------------------------|-----------|----------|----|
|       |                                     | Debtor(s) | Chapter  | 11 |

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

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

| (1)   | (2)   | (3)   | (4)   | (5)  |
|---|---|---|---|--|
| Name of creditor and complete<br>mailing address including zip<br>code                                | Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.)                 | Indicate if claim is contingent, unliquidated, disputed, or subject to setoff | Amount of claim [if secured, also state value of security] |
| City of Memphis<br>PO Box 185<br>Memphis, TN 38101-0185   | City of Memphis<br>PO Box 185<br>Memphis, TN 38101-0185   |   |   | 5,849.17   |
| LINECO<br>c/o Robert B. Greenberg, Esq<br>200 West Jackson Blvd., Ste.<br>1900<br>Chicago, IL 60606   | LINECO<br>c/o Robert B. Greenberg, Esq<br>200 West Jackson Blvd., Ste. 1900<br>Chicago, IL 60606  | Debtor asserts this is claim against Allied Electrical Contractors, LLC and not this Debtor | Contingent<br>Unliquidated<br>Disputed  | 219,942.61   |
| National Electircal Benefit<br>Fund<br>(NEBF)<br>2400 Research Blvd., Ste. 500<br>Rockville, MD 20850 | National Electircal Benefit Fund<br>(NEBF)<br>2400 Research Blvd., Ste. 500<br>Rockville, MD 20850  | Debtor asserts this is claim against Allied Electrical Contractors, LLC and not this debtor | Contingent<br>Unliquidated<br>Disputed  | 206,783.56   |
| Shelby County Trustee<br>PO Box 2751<br>Memphis, TN 38101-2751  | Shelby County Trustee PO Box 2751 Memphis, TN 38101-2751  | Property Taxes  |   | 7,479.61   |
|   |   |   |   |  |
|   |   |   |   |  |
|   |   |   |   |  |
|   |   |   |   |  |
|   |   |   |   |  |

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| B4 (Offi | cial Form 4) (12/07) - Cont.        |          |  |
|----------|-------------------------------------|----------|--|
| In re    | Allied Electrical Contractors, Inc. | Case No. |  |
|          | Debtor(s)                           |          |  |

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

| (1)  | (2)   | (3)   | (4)   | (5)  |
|--|---|---|---|--|
| Name of creditor and complete<br>mailing address including zip<br>code | Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.) | Indicate if claim is contingent, unliquidated, disputed, or subject to setoff | Amount of claim [if secured, also state value of security] |
|  |   |   |   |  |
|  |   |   |   |  |
|  |   |   |   |  |
|  |   |   |   |  |
|  |   |   |   |  |
|  |   |   |   |  |
|  |   |   |   |  |

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

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

| Date | February 23, 2011 | Signature | /s/ Michael A. Eskridge |
|------|-------------------|-----------|-------------------------|
|      |                   |           | Michael A. Eskridge     |
|      |                   |           | President               |

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

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B6A (Official Form 6A) (12/07)

| In re | Allied Electrical Contractors, Inc. | Case No. |  |
|-------|-------------------------------------|----------|--|
| -     |                                     | Debtor   |  |

#### **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 "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.

| 1190 Walker, Memph | is, TN Parcel ID No26007 | Fee simple                                 | -   | 235,000.00   | 117,400.00                 |
|--------------------|--------------------------|--|---|--|----------------------------|
| Description        | and Location of Property | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > 235,000.00 (Total of this page)

235,000.00 Total >

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B6D (Official Form 6D) (12/07)

| In re | Allied Electrical Contractors, Inc. | Case No. |  |
|-------|-------------------------------------|----------|--|
|       |                                     | ,        |  |
|       |                                     | Debtor   |  |

## 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.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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 the 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.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

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

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 | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTLNGENT | UNLLQULDA        | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------------|------------------------|--|------------|------------------|----------|--|---------------------------------|
| Account No.  |                 |                        | 1190 Walker, Memphis, TN Parcel ID No26007 00004   | T          | A<br>T<br>E<br>D |          |  |                                 |
| Capital Partners Leasing, LLC<br>2112 First Avenue North<br>Birmingham, AL 35203                     |                 | -                      | -20007 00004   |            |                  |          |  |                                 |
|  | L               |                        | Value \$ 235,000.00  |            |                  |          | 117,400.00   | 0.00                            |
| Account No.  |                 |                        | Value \$   | -          |                  |          |  |                                 |
|  |                 |                        | Value \$   |            |                  |          |  |                                 |
| Account No.  |                 |                        | Value \$   |            |                  |          |  |                                 |
|  |                 |                        |  | Subt       | ota              |          |  |                                 |
| continuation sheets attached   |                 |                        | (Total of t  |            |                  |          | 117,400.00   | 0.00                            |
|  |                 |                        | (Report on Summary of So   |            | ota<br>ule       |          | 117,400.00   | 0.00                            |

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B6E (Official Form 6E) (4/10)

| In re | Allied Electrical Contractors, Inc. | Case No |  |
|-------|-------------------------------------|---------|--|
|       | •                                   | Dobtor  |  |

#### 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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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 the husband, wife, both of them, or the marital community may be eled

| 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 lab "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 "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Subtotals" on each sheet. |
|---|
| "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 "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.   |
| Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.  |
| ☐ 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 \$11,725* 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 \$5,775* 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 \$2,600* 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).  |
|   |

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/10) - Cont.

| In re | Allied Electrical Contractors, Inc. | Case No. |  |
|-------|-------------------------------------|----------|--|
| _     |                                     | Debtor   |  |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. City of Memphis 0.00 **PO Box 185** Memphis, TN 38101-0185 5,849.17 5,849.17 **Property Taxes** Account No. **Shelby County Trustee** 0.00 PO Box 2751 Memphis, TN 38101-2751 7,479.61 7,479.61 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 13,328.78 Schedule of Creditors Holding Unsecured Priority Claims 13,328.78 Total 0.00 (Report on Summary of Schedules) 13,328.78 13,328.78

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B6F (Official Form 6F) (12/07)

| In re | Allied Electrical Contractors, Inc. |        | Case No. | Case No. |  |  |  |
|-------|-------------------------------------|--------|----------|----------|--|--|--|
| _     |                                     | Debtor |          |          |  |  |  |

## 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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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 the 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 and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

...............................

| Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.   |          |              |  |            |                       |    |           |                 |
|--|----------|--------------|--|------------|-----------------------|----|-----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR | Hu<br>H<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  | CONTINGENT | UNLIQUIDA             | ΙE | S P U T E | AMOUNT OF CLAIM |
| Account No.  |          |              | Debtor asserts this is claim against Allied Electrical Contractors, LLC and not this           | T Y        | D<br>A<br>T<br>E<br>D |    | Ī         |                 |
| LINECO<br>c/o Robert B. Greenberg, Esq<br>200 West Jackson Blvd., Ste. 1900<br>Chicago, IL 60606   |          | -            | Debtor   | х          | х                     | ,  | x         | 219,942.61      |
| Account No.  |          |              | Debtor asserts this is claim against Allied<br>Electrical Contractors, LLC and not this debtor | -          |                       | T  |           |                 |
| National Electircal Benefit Fund<br>(NEBF)<br>2400 Research Blvd., Ste. 500<br>Rockville, MD 20850 |          | -            | Lieutical Contractors, LEC and not this dept   |            | x                     | :  | x         |                 |
|  |          |              |  |            |                       |    |           | 206,783.56      |
| Account No.  |          |              |  |            |                       |    |           |                 |
| Account No.  |          |              |  |            |                       |    |           |                 |
| continuation sheets attached   |          |              | (Total of t  | Subt       |                       |    | )         | 426,726.17      |
|  |          |              | (Report on Summary of So   |            | Γota<br>dule          |    | ) [       | 426,726.17      |

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# **United States Bankruptcy Court** Western District of Tennessee

| In re    | Allied Electrical Contractors, Inc.          |                                      | Case No.             |                                  |
|----------|--|--------------------------------------|----------------------|----------------------------------|
|          |  | Debtor(s)                            | Chapter              | 11                               |
|          |  |                                      |                      |                                  |
|          | VEDIEICA                                     | TION OF CREDITOR                     | MATRIX               |                                  |
|          | VERIFICA                                     | TION OF CREDITOR                     |                      |                                  |
|          |  |                                      |                      |                                  |
| I, the P | resident of the corporation named as the deb | tor in this case, hereby verify that | the attached list of | creditors is true and correct to |
| the best | t of my knowledge.                           |                                      |                      |                                  |
|          |  |                                      |                      |                                  |
|          |  |                                      |                      |                                  |
|          |  |                                      |                      |                                  |
| Date:    | February 23, 2011                            | /s/ Michael A. Eskridge              |                      |                                  |
|          |  | Michael A. Eskridge/Presider         | nt                   |                                  |
|          |  | Signer/Title                         |                      |                                  |

Capital Partners Leasing, LLC 2112 First Avenue North Birmingham, AL 35203

City of Memphis PO Box 185 Memphis, TN 38101-0185

LINECO c/o Robert B. Greenberg, Esq 200 West Jackson Blvd., Ste. 1900 Chicago, IL 60606

National Electircal Benefit Fund (NEBF) 2400 Research Blvd., Ste. 500 Rockville, MD 20850

Shelby County Trustee PO Box 2751 Memphis, TN 38101-2751