Fill in this information to identify your c	in this information to identify your case:									
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS										
Case number (if known):	Chapter you are filing under: ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13		_	-				Check if this is amended filing		Check if this is an amended filing

Official Form 101

Part 1:

Identify Yourself

Voluntary Petition for Individuals Filing for Bankruptcy

About Debtor 1:

Last Name

xxx - xx -

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Your full name		
	Write the name that is on your	Brent	Dawn
	government-issued picture identification (for example,	First Name	First Name
	your driver's license or	Lynn	Elise
	passport).	Middle Name	Middle Name
	. ,	Bennett	Bennett
	Bring your picture	Last Name	Last Name
	identification to your meeting		
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		Dawn
	have used in the last 8	First Name	First Name
	years		Elise
		Middle Name	Middle Name

 Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

Include your married or

maiden names.

OR			
9xx -	xx -	 	

xxx - xx - <u>8</u>	_0_	_4_	_4_
OR			
9xx - xx			

Dawson

Last Name

About Debtor 2 (Spouse Only in a Joint Case):

Deb	otor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case nu	mber (if knowr	n)	
			About Debte	or 1:	Abo	out Debtor 2 (Spouse On	y in a Joint Case):
4.		usiness names	☐ I have r	not used any business names or EI	Ns.	I have not us	ed any busi	ness names or EINs.
		nployer ication Numbers	Brent Beni	nett Performance Horse				
	(EIN) y	ou have used in	Business name		Busi	ness name		
		st 8 years	Brent Beni Business name	nett Utility Water Taps	_ Busi	ness name		
		e trade names and ousiness as names						
			Business name	9	Busi	ness name		
					. <u>—</u> EIN			
					<u> </u>			
_	\A/I	It.a	EIN		EIN	ahtan 0 livaa	-4 - Jiff	4 - 4-1
5.	wnere	you live			ט זו	ebtor 2 lives a	at a differen	it address:
			6856 CR 40 Number Str	D6 eet		ber Street		
			Number Su	661	Null	ibei Stieet		
			Grandview	TX 76050	- -	andview	тх	76050
			City	State ZIP Code	City	anuview	State	ZIP Code
			Johnson			nnson		
			County		Cou	nty		
			the one abo	ng address is different from ve, fill it in here. Note that the ad any notices to you at this ess.	fror will	ebtor 2's mail m yours, fill it send any notid ress.	in here. No	te that the court
			Number Str	eet	Num	nber Street		
			P.O. Box		P.O.	. Box		
			City	State ZIP Code	City		State	ZIP Code
6.	Why ye	ou are choosing	Check one:		Che	eck one:		
	this di	strict to file for	⊘ Over th	e last 180 days before filing this	V	Over the last	180 days b	efore filing this
	Dalikit	эргоу	petition	, I have lived in this district longer any other district.		petition, I have than in any of		nis district longer
				another reason. Explain.		I have anoth		Explain.
			(366.20	0.3.C. § 1406.)		(366 20 0.3.	.C. § 1406.)	
Р	art 2:	Tell the Court	About Your Ba	nkruptcy Case				
7.		napter of the uptcy Code you		For a brief description of each, see α (Form 2010)). Also, go to the top				
	are che under	oosing to file	☐ Chapter 7	7				
			✓ Chapter ?	11				
			☐ Chapter 1	12				
			☐ Chapter 1	13				

Deb	tor 1	Brent	Lynn	Bennett Ca	se nun	nber (if known)		
		First Name	Middle Name	e Last Name		, , , ,		
8.	How y	ou will pay the fee	co	will pay the entire fee when I file my petition out for more details about how you may pay. ay with cash, cashier's check, or money order. ehalf, your attorney may pay with a credit card	Typical If your	ly, if you are pay attorney is sub	ring the fee you mitting your pay	rself, you may
				need to pay the fee in installments. If you che dividuals to Pay Your Filing Fee in Installment				Application for
			By tha fee	request that my fee be waived (You may req y law, a judge may, but is not required to, waive an 150% of the official poverty line that applies e in installments). If you choose this option, you ling Fee Waived (Official Form 103B) and file	e your to s to you ou mus	fee, and may do ur family size an st fill out the App	so only if your d you are unabl	income is less e to pay the
9.		you filed for cruptcy within the	□ No	0				
		uptcy within the years?	√ Ye	es.				
		•	District	Northern District of Texas, Fort Wort	When	07/07/2015 MM / DD / YYYY	Case number	15-42786-RFN
			District		When	MM / DD / YYYY	Case number	
			District		When	MM / DD / YYYY	Case number	
10.		e any bankruptcy ses pending or being	☑ No	0				
		y a spouse who is	☐ Ye	es.				
		ing this case with or by a business	Debtor			Relationsh	nip to you	
	-	er, or by an	District		When	MM / DD / YYYY		
			Debtor			Relationsh	nip to you	
			District	:	When	MM / DD / YYYY	Case number, if known	
11.	Do yo reside	u rent your nce?	✓ No	Go to line 12.Has your landlord obtained an eviction juresidence?	dgmen	t against you an	d do you want to	o stay in your
				No. Go to line 12. Yes. Fill out Initial Statement About and file it with this bankruptcy petition		ction Judgment	Against You (Fo	orm 101A)

Deb	tor 1	Brent First Name	Lynn Middle Na	ame	Bennett Last Name	Cas	e number (if known) _			
Pa	art 3:	•			sses You Own as	a Sole Proprieto	or			
	Are you	u a sole proprietor full- or part-time	<u>, ⊃</u> ☑	No. (Go to Part 4. Name and location of b	•	•			_
	busines individu separat	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street					
	sole pro	ave more than one oprietorship, use a see sheet and attach it petition.			Single Asset Rea Stockbroker (as of	ness (as defined in 1	11 U.S.C. § 101(27A)) in 11 U.S.C. § 101(51E § 101(53A))		Code	
;	Chapte Bankru	u filing under or 11 of the optcy Code and u a small business ?	can mos	set ap t recer any of	None of the above filing under Chapter 11, propriate deadlines. If not balance sheet, staten these documents do not lam not filing under C	the court must know you indicate that you nent of operations, co to exist, follow the pr	are a small business ash-flow statement, an	debtor, yo d federal	ou must attach your income tax return	
	busines	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	•	a small business deb	tor accord	ding to the definition	in
	11 0.5.	C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a sm	nall business debtor ac	cording to	o the definition in the	е
Pa	art 4:	Report If You C)wn or	Hav	e Any Hazardous I	Property or Any	Property That No	eds Im	mediate Attent	ion
14.	proper alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the hazard?					
	safety?	Or do you own operty that needs iate attention?			If immediate attention	is needed, why is it r	needed?			
	perisha livestod a buildi	For example, do you own perishable goods, or ivestock that must be fed, or a building that needs urgent epairs?			Where is the property	Number Street				<u> </u>
						City		State	ZIP Code	

Debtor 1 **Brent** Lynn Bennett Case number (if known) First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: You must check one:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a

Deb	otor 1	Brent	Lynn	Bennett		Case number (if	know	n)				
		First Name	Middle Na	ame Last Name								
P	art 6:	Answer These	Questi	ons for Reporting F	Purpos	ses						
16.	What k have?	ind of debts do you	16a.	as "incurred by an indiv	= ,, , , , , , , , , , , , , , , , , ,							
			16b.	•	or invest	iness debts? Business deb ment or through the operation		e debts that you incurred to obtain e business or investment.				
			16c.	State the type of debts	you owe	e that are not consumer or bu	sines	s debts.				
17.	Are yo Chapte	u filing under er 7?		No. I am not filing und	der Chap	eter 7. Go to line 18.						
á	any ex	estimate that after empt property is		-		•	-	xempt property is excluded and to distribute to unsecured creditors?				
	admini	excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No								
	availab			Yes								
18.		nany creditors do		1-49		1,000-5,000		25,001-50,000				
	owe?	timate that you		50-99 100-199 200-999		5,001-10,000 10,001-25,000		50,001-100,000 More than 100,000				
19.		nuch do you te your assets to		\$0-\$50,000 \$50,001-\$100,000		\$1,000,001-\$10 million \$10,000,001-\$50 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion				
	be wor	•	$\overline{\square}$	\$100,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$50,000,001-\$500 million \$100,000,001-\$500 million		\$10,000,000,001-\$10 billion More than \$50 billion				
20.		nuch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000		\$1,000,001-\$10 million \$10,000,001-\$50 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion				
	be?	,		\$100,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$50,000,001-\$100 million \$100,000,001-\$500 million		\$10,000,000,001-\$10 billion More than \$50 billion				

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Case number (if known)						
Part 7:	Sign Below								
For you		I have examined and correct.	d this petition, and I declare unde	er penalty of perjury that the information provided is true					
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choproceed under Chapter 7.									
		•		agree to pay someone who is not an attorney to help me he 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.							
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
		X /s/ Brent Ly	ynn Bennett	X /s/ Dawn Elise Bennett					
		Brent Lynn B	Bennett, Debtor 1	Dawn Elise Bennett, Debtor 2					
		Executed on	04/01/2016	Executed on 04/01/2016					

MM / DD / YYYY

MM / DD / YYYY

Debtor 1	Brent	Lynn	Bennett	Case number (if know	n)
	First Name	Middle Name	Last Name	`	,
represent	•	eligibility to prelief availab	proceed under Chapter 7, ble under each chapter fo	d in this petition, declare that I have 11, 12, or 13 of title 11, United Sta r which the person is eligible. I also	ntes Code, and have explained the co certify that I have delivered to
If you are not represented by an attorney, you do not need to file this page.		` '		1 U.S.C. § 342(b) and, in a case in an inquiry that the information in th	
			a Holder Aurzada	Date	04/01/2016
		Signature	e of Attorney for Debtor		MM / DD / YYYY
			older Aurzada		
		Printed na			
		Law Off Firm Nam	ice of Areya Holder, F	P.C.	
				900	
		Number	Airport Freeway, Suite Street	: 000	
		Irving		TX	75062
		City		State	ZIP Code
		Contact p	phone (972) 438-8800	Email address areya	@holderlawpc.com
		2400230	13	тх	

State

Bar number

Fill in this informati	on to identify w	our case and	this filing:				
Debtor 1 Brent First Nar Debtor 2 (Spouse, if filing) United States Bankruptcy Case number (if known)	Lynn ne Middle Elise me Middle	Name	Bennett Last Name Bennett Last Name	_	check if this is an mended filing		
Official Form 106A Schedule A/B: Pr					12/15		
the asset in the category filing together, both are esheet to this form. On the	where you think it f qually responsible top of any addition	its best. Be as for supplying c nal pages, write	n asset only once. If an as complete and accurate as correct information. If mor e your name and case num Land, or Other Real E	s possible. If two marri e space is needed, atta nber (if known). Answe	ed people are ch a separate er every question.		
1. Do you own or have a No. Go to Part 2 Yes. Where is th		ole interest in a	ny residence, building, lar	nd, or similar property?			
1.1. 6856 CR 706, Grandview, Texas 76050 Approximately 8 acres in the WILLIAM CRAVENS SURVEY, Abstract No. 137, recorded in Volume 2104, Page 64 of Johnson County, Texas		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land		Do not deduct secured claims or exemptions. For amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Proper Current value of the entire property? \$275,000.00 Current value of the portion you own? \$275,000.00			
County		Investment property ☐ Timeshare ☑ Other 6856 CR 706, Grandview, Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anoth Other information you wish to add about		Fee st Deed of Trust Check if this is community property (see instructions)			

Debtor 1	Brent	Lynn		Case number (if known)				
	First Name	Middle Name	Last Name					
1.2. 2 Funera			What is the property? Check all that apply.	Do not deduct secured clai	ims on Schedule D:			
1219 N. E	uneral Hon Davis Drive n, TX 76012	9	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	Creditors Who Have Claim Current value of the entire property?	Current value of the portion you own?			
	ughter bui	ried in one of	Manufactured or mobile home	\$2,000.00	\$2,000.00			
Spaces			☐ Land ☐ Investment property ☐ Timeshare ☑ Other 2 Funeral spaces	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.				
			Who has an interest in the property? Check one.	Burial Plots				
			☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anoth	Check if this is comm (see instructions)	nunity property			
			Other information you wish to add aboroperty identification number:	out this item, such as local	_			
		•	own for all of your entries from Part 1, in Part 1. Write that number here	_	\$277,000.00			
Part 2:	Descr	ibe Your Vehicles		•				
3. Cars,	, vans, truci	else drives. If you lease	a vehicle, also report it on Schedule G: E vehicles, motorcycles	xecutory Contracts and Unexpi	red Leases.			
3.1. Make:		Ford	Who has an interest in the property? Check one.	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ims on Schedule D:			
Model:		Edge	Debtor 1 only Debtor 2 only	Current value of the	Current value of the			
Year:		2010	Debtor 1 and Debtor 2 only	entire property?	portion you own?			
	ate mileage:	81,000	At least one of the debtors and anoth	ner \$12,250.00	\$12,250.00			
Other infor		nnev 94000 miles)	Check if this is community proportion					
2010 FOR	u ⊏uge (ap	pprox. 81000 miles)	Check if this is community propert (see instructions)	.y				
3.2.			Who has an interest in the property?	Do not deduct secured clai	ms or exemptions. Put the			
Make:		Isuzu	Check one.	amount of any secured clair				
Model:		Assender	Debtor 1 only	Creditors Who Have Claim				
Year:		2006	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?			
Approxima	ate mileage:	180,000	At least one of the debtors and anoth		\$1,500.00			
Other infor	rmation:		_					
		on the vehicle went e is currently not	Check if this is community propert (see instructions)	у				

Debto	or 1 Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)	
3.3.			Who has an interest in the property?	Do not deduct secured clai	ims or exemptions. Put the
Make	:	Ford	Check one.	amount of any secured cla	
Mode	l:	F350	Debtor 1 only	Creditors Who Have Claim	, , ,
Year:		1997	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Appro	oximate mileage:	150,000	At least one of the debtors and anoth		\$4,675.00
Other	information:				<u> </u>
1997 miles	′ Ford F350 (ap s)	prox. 150000	Check if this is community propert (see instructions)	ty	
			and other recreational vehicles, other value watercraft, fishing vessels, snowmobiles		
	□ No V Yes		-		
	V				
4.1.		C	Who has an interest in the property? Check one.	Do not deduct secured clai	·
Make		Suzuki	Debtor 1 only	amount of any secured cla Creditors Who Have Claim	
Mode		4 Wheeler	Debtor 2 only	Current value of the	Current value of the
Year:		1995	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	information: Suzuki 4 Whe	eler	At least one of the debtors and anoth	ner \$400.00	\$400.00
			Check if this is community propert	ty	
_	A alal than alallan	-l of the mention	(see instructions)	a de din a ann	
		•	own for all of your entries from Part 2, ir Part 2. Write that number here		\$18,825.00
			terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	Is and furnishings appliances, furniture, line	ens, china, kitchenware		
	□ No ☑ Yes. Describ	e Household Furn	ishings		\$2,700.00
	music		video, stereo, and digital equipment; comp evices including cell phones, cameras, me	•	
	□ No ☑ Yes. Describ	e TVs, Computers	, DVD player, printer, music, cell ph	nones, etc.	\$2,500.00
		ues and figurines; painting	gs, prints, or other artwork; books, pictures ollections; other collections, memorabilia,	•	
	□ No ☑ Yes. Describ	oe Movies and Art			\$300.00
	Examples: Sport		, and other hobby equipment; bicycles, po tools; musical instruments	ol tables, golf clubs, skis;	
	✓ No ✓ Yes. Describ	pe			
	Firearms <i>Examples:</i> Pistol	s, rifles, shotguns, ammu	nition, and related equipment		
-	□ No ☑ Yes. Describ	e See continuation	n nage(s)		\$649.00

Deb		rent	Lynn	Bennett	Case number (if known)			
		st Name	Middle Name	Last Name				
11.	Clothes Examples	Everyday cloth	es, furs, leather	coats, designer wear, shoes,	accessories			
	☐ No ✓ Yes. I	Describe Clo	othing and acc	cessories		\$650.00		
12.	Jewelry							
	Examples.	Everyday jewel gold, silver	ry, costume jew	elry, engagement rings, wedd	ing rings, heirloom jewelry, watches, gems,			
	☐ No ✓ Yes. I	Describe W e	edding Rings			\$350.00		
13.	Non-farm							
	Examples: ☐ No	Dogs, cats, bird	ds, norses					
	_	Describe Do	gs			\$100.00		
14.	Any other	•	ousehold items	s you did not already list, in	cluding any health aids you			
	☑ No							
Yes. Give specific information								
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have								
15.	attached f	\$7,249.00						
Б	4.	Dagariha Var	Financial	A t -				
Pa	art 4:	Describe You	ur Financiai i	ASSETS				
Do y	ou own or	have any legal	or equitable in	terest in any of the following	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
16.	Cash Examples.	Money you hav	re in your wallet,	in your home, in a safe depor	sit box, and on hand when you file your			
	□ No Yes				Cash:	\$75.00		
17.	— Deposits	of money						
	•	Checking, savi	ses, and other si		f deposit; shares in credit unions, multiple accounts with the same			
	□ No ☑ Yes		Insti	tution name:				
	17.1.	Checking acc	count: Citi	zens State Bank Acct#02	31	\$605.43		
	17.2.	Checking acc		zens State Bank Busines et#3303	s Account	\$985.59		
18.		utual funds, or property of the state of the		stocks nts with brokerage firms, mon-	ey market accounts			
	✓ No		Institution or is	-				

Deb	tor 1 Brent	Lynn	Bennett	Case number (if known)				
	First Name	Middle Name	Last Name					
19.	non-publicly traded stock an interest in an LLC, par		•	rporated businesses, including				
	No ✓ Yes. Give specific information about							
	them	Name of entity:		% of ownership:				
		dba Brent Ben	nett Performance Hor	se	\$1.00			
20.		lude personal chec	ks, cashiers' checks, pror	gotiable instruments nissory notes, and money orders. by signing or delivering them.				
	✓ No Yes. Give specific information about them	Issuer name:						
21.	Retirement or pension ac Examples: Interests in IRA profit-sharing p	, ERISA, Keogh, 4	01(k), 403(b), thrift saving	s accounts, or other pension or				
	✓ No ✓ Yes. List each account separately.	Type of account:	Institution name:					
22.		eposits you have m	•	nue service or use from a company etric, gas, water), telecommunications				
	☑ No							
	Yes		Institution name or indivi	dual:				
23.	☑ No			either for life or for a number of years)				
	Yes Issuer name and description:							
24.	26 U.S.C. §§ 530(b)(1), 52			gram, or under a qualified state tuition program.				
	✓ No ✓ Yes	Institution name a	and description. Separate	ly file the records of any interests. 11 U.S.C. § 521(c)				
25.		e interests in prop		g listed in line 1), and rights or				
	✓ No ✓ Yes. Give specific information about them	n						
26.	Patents, copyrights, trade Examples: Internet domain							
	✓ No✓ Yes. Give specific information about them	n						
27.	Licenses, franchises, and Examples: Building permit	-	_	n holdings, liquor licenses, professional licenses				
	✓ No Yes. Give specific information about them	1						

Deb	tor 1	Brent	Lynn	Bennett	Case numbe	r (if known)	
		First Name	Middle Name	Last Name			
Mor	ney or p	roperty owed t	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to	you				
	☑ No)					
	Ye	s. Give specific				Federal	\$0.00
		out them, includ u already filed th	~			State:	\$0.00
	•	d the tax years.				Local:	\$0.00
29.	Examp		or lump sum alimony, sp	ousal support, child suppor	t, maintenance, divorce	settlement, property	v settlement
	□ No ✓ Ye	s. Give specific	c information			Alimony:	\$0.00
	_ Sı	ipport: Past o		r 15 years of approxima		Maintenance:	\$0.00
			azaa 7 mm 40100			Support:	\$0.00
						Divorce settlement:	\$0.00
						Property settlement	\$0.00
	✓ No	compensa	tion, Social Security ber	e payments, disability bene nefits; unpaid loans you ma		ay, workers	
31.		sts in insurance bles: Health, dis	•	; health savings account (H	SA); credit, homeowner	's, or renter's insura	nce
	CO	s. Name the in mpany of each d list its value	policy	ame:	Beneficiary:	Su	rrender or refund value:
32.	If you a	are the beneficia	•	m someone who has died ect proceeds from a life inst has died		rently	
	✓ No	s. Give specific	c information				
33.		-	•	t you have filed a lawsuit insurance claims, or rights		payment	
	☐ No ✓ Ye		ch claim Debt ov	ved to Debtor on mach	inary sold		\$18,000.00
34.	rights	to set off claim	•	of every nature, including	counterclaims of the d	ebtor and	
	✓ No	s. Describe ea	ch claim				
35.	Any fir	nancial assets	you did not already lis	t			
	✓ No	s. Give specific	c information				
36.				om Part 4, including any		ave	\$19,667.02

Deb	tor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if kno	wn)
Pa	art 5:	Describe An	y Business-Rela	ted Property You Ow	n or Have an Interest In.	List any real estate in Part 1.
37.	□ N	ou own or have a o. Go to Part 6. es. Go to line 38.		interest in any business-	related property?	
	▼ Ye	es. Go to line 30.				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	unts receivable o	or commissions you	already earned		·
	□ No ☑ Ye		ccounts receivable	es		\$7,750.00
39.	Exam	ples: Business-re desks, chai	nishings, and supplied elated computers, softers, electronic devices		piers, fax machines, rugs, teleph	nones,
	☑ No	es. Describe				
40.	— Machi	inery, fixtures, e	quipment, supplies y	ou use in business, and t	cools of your trade	
	□ No ✓ Ye		addles, Bits for Ho	orses and Hand Tools		\$6,500.00
41.	Invent	tory				
	✓ No	o es. Describe				
42.	Intere	ests in partnersh	ips or joint ventures			
	✓ No	o es. Describe	Name of entity:		% of o	wnership:
43.	Custo	omer lists, mailin	g lists, or other com	pilations		
	☐ No	es. Do your lists No		dentifiable information (a	as defined in 11 U.S.C. § 101(41	A))? \$1.00
44	Any h	_	property you did not		erromance riorse	
44.	✓ No			aneauy nsi		
45.			•		entries for pages you have	\$14,251.00
Pa	art 6:			nmercial Fishing-Rel n farmland, list it in Par	ated Property You Own c t 1.	or Have an Interest In.
46.	Do yo	ou own or have a	ny legal or equitable	interest in any farm- or c	ommercial fishing-related prop	perty?
	_	o. Go to Part 7. es. Go to line 47.				

Deb	tor 1	Brent	Lynn	Bennett	Case number (if known)	
		First Name	Middle Name	Last Name		
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals				•
	Example	les: Livestock, p	oultry, farm-raised fish			
	□ No					
	Yes	Roping Ca	alves			\$4,500.00
	_					
48.	Crops-	-either growing	or harvested			
	☑ No					
		s. Give specific				
	info	rmation				
49.	Farm a	nd fishing equi	pment, implements, m	nachinery, fixtures, and	tools of trade	
		0	, , ,	• ,		
	□ No					¢ E E00 00
	✓ Yes	S See contir	nuation page(s).			\$5,500.00
50.	Farm a	nd fishing supp	lies, chemicals, and f	eed		
	□ No					
		Each for A	nimala			\$900.00
	▼ ies	S Feed for A	Milliais			φ300.00
51.	Any far	m- and comme	rcial fishing-related p	roperty you did not alrea	ady list	
	☑ No					
		s. Give specific				
	_	ormation				
52	Add th	a dollar value o	fall of your optrios fro	om Part 6 including any	entries for pages you have	
JZ.				art o, including any		\$10,900.00
					_	
Pa	art 7:	Describe All	Property You Ow	n or Have an Intere	st in That You Did Not List Above	e
			. ,			
53.	Do you	have other pro	perty of any kind you	did not already list?		
	Example	les: Season tick	ets, country club memb	ership		
	□ N≏					
	✓ No	s. Give specific	information			
	□ '€	5. Give specific	inionnation.			
54	Add the	e dollar value o	f all of your entries fro	om Part 7 Write that no	mber here	\$0.00
J . .	Auu III	C achiai value o	i ali oi your chales il	mir art r. Write tilat ilu	100	

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case nu	ımber (if known)			
Part 8:	List the Tota	Is of Each Part of	this Form					
55. Part 1	: Total real estate	e, line 2				→		\$277,000.00
56. Part 2	: Total vehicles,	line 5		\$18,825.00				
57. Part 3	: Total personal	and household items,	line 15	\$7,249.00				
58. Part 4	: Total financial a	assets, line 36		\$19,667.02				
59. Part 5	: Total business-	related property, line	45	\$14,251.00				
60. Part 6	: Total farm- and	fishing-related proper	rty, line 52	\$10,900.00				
61. Part 7	: Total other pro	perty not listed, line 54	٠ .	\$0.00				
62. Total į	personal propert	y. Add lines 56 through	gh 61	\$70,892.02	Copy personal property total	→	+	\$70,892.02
63. Total of	of all property on	Schedule A/B. Add	I line 55 + line 62					\$347,892.02

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Debtor 1		Brent	Lynn Bennett		Case number (if known)	
		First Name	Middle Name	Last Name		
10.	Firear	ms (details):				
	Remi	ngton 270			_	\$499.00
	3030	Marlin			_	\$150.00
49.	Farm a	and fishing equip	oment, implements, m	achinery, fixtures, and t	ools of trade (details):	
	1999	Stock Trailer 2	4 ft.		_	\$3,000.00
	2000	Horse Trailer 1	6 FT		_	\$1,500.00
	1990	Mahiandra Trad	ctor			\$1,000.00

Debtor 1	Brent	Lynn	Bennett		_	
Debtor 2	First Name Dawn	Middle Nan Elise	ne Last Name Bennett		_	
(Spouse, if filing)		Middle Nan			_	
Jnited States Ba	nkruptcy Court fo	or the: NORTHI	ERN DISTRICT OF T	EXAS	_	Check if this is an
Case number (if known)						amended filing
Official Form	106C					
chedule C	: The Prop	erty You C	laim as Exemp	ot		04/1
sing the property pace is needed, fi rite your name an	you listed on Sc ill out and attach nd case number (hedule A/B: Pro to this page as i if known).	perty (Official Form 106 many copies of Part 2	6A/B) as you 2: Additional	r source, list th Page as nece	esponsible for supplying correct information be property that you claim as exempt. If more seary. On the top of any additional pages,
to state a speci tempted up to the ceive certain be temption of 100°	ific dollar amour ne amount of any enefits, and tax-e % of fair market	nt as exempt. A y applicable sta exempt retireme value under a l	Alternatively, you may atutory limit. Some ex ent fundsmay be unl	claim the fu emptionss imited in do mption to a	III fair market such as those IIar amount. I particular dol	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the lle statutory amount.
Part 1: Ide	entify the Pro	perty You Cl	aim as Exempt			
Which set of	exemptions are	you claiming?	Check one only, e	even if your s	spouse is filing	with you.
_	=		nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.S.C. § 5	522(b)(3)	
For any prop	erty you list on	Schedule A/B t	hat you claim as exen	npt, fill in the	e information	below.
•	of the property a t lists this prope		Current value of the portion you own	he portion you exemption you claim		Specific laws that allow exemption
			Copy the value from	Check only		
			Schedule A/B	each exemp	OliON	
rief description: 856 CR 706, GI pproximately 8 RAVENS SUR ecorded in Voli ohnson Count ne from Schedule	8 acres in the \ VEY, Abstract ume 2104, Pag y, Texas	WILLIAM No. 137,	\$275,000.00	✓ \$1 100% value,	4,642.23 of fair market up to any able statutory	11 U.S.C. § 522(d)(1)

Debtor 1	Brent First Name	Lynn Middle Nome	Bennett	Case number	r (if known)
	First Name	Middle Name	Last Name		
Part 2:	Additional	Page			
	ription of the pro A/B that lists this		Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	eck only one box for h exemption	
1219 N. D Arlington Infant da	•	-	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
miles) The trans and the v	zu Assender (ap	vehicle went out, atly not running.	\$1,500.00	\$1,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
(1st exen	d F350 (approx. nption claimed t		\$4,675.00	\$3,775.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
(2nd exer	d F350 (approx. mption claimed	•	\$4,675.00	\$900.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	uki 4 Wheeler	4.1	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
	ription: Ild Furnishings Schedule A/B:	6	\$2,700.00	\$2,700.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
music, ce	ription: nputers, DVD pl ell phones, etc. Schedule A/B:		\$2,500.00	\$2,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descr Movies a Line from S	•	8	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1	Brent	Lynn	Bennett	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 2:	Additiona	l Page						
	ription of the pro	operty and line on s property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B		eck only one box for h exemption			
Brief description: Remington 270			\$499.00		\$499.00 100% of fair market	11 U.S.C. § 522(d)(5)		
	Schedule A/B:	10			value, up to any applicable statutory limit			
Brief descr	•		\$150.00	<u> </u>	\$150.00 100% of fair market	11 U.S.C. § 522(d)(5)		
Line from S	Schedule A/B:	10			value, up to any applicable statutory limit			
Brief descr	ription:	es	\$650.00	<u> </u>	\$650.00 100% of fair market	11 U.S.C. § 522(d)(3)		
_	Schedule A/B:				value, up to any applicable statutory limit			
Brief descr Wedding			\$350.00	$\overline{\mathbf{Q}}$	\$350.00 100% of fair market	11 U.S.C. § 522(d)(4)		
_	Schedule A/B:	12			value, up to any applicable statutory limit			
Brief descr	ription:		\$100.00	<u> </u>	\$100.00 100% of fair market	11 U.S.C. § 522(d)(3)		
•	Schedule A/B:	13			value, up to any applicable statutory limit			
Brief descr Cash on	•		\$75.00	<u> </u>	\$75.00 100% of fair market	11 U.S.C. § 522(d)(5)		
Line from S	Schedule A/B:	16			value, up to any applicable statutory limit			
Brief descr	ription: State Bank Acc	ct#0231	\$605.43	V	\$605.43 100% of fair market	11 U.S.C. § 522(d)(5)		
Line from S	Schedule A/B:	<u>17.1 </u>			value, up to any applicable statutory limit			
Brief descr	•	siness Account	\$985.59	<u> </u>	\$985.59 100% of fair market	11 U.S.C. § 522(d)(5)		
Acct#330					value, up to any applicable statutory limit			
Brief descr	•	ormance Horse	\$1.00	<u> </u>	\$1.00 100% of fair market	11 U.S.C. § 522(d)(5)		
	Schedule A/B:	19		u	value, up to any applicable statutory limit			

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name		Case number	(if known)
Part 2:	Additiona	l Page				
	cription of the presented A/B that lists this	operty and line on s property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description: Past due child support for 15 years of approximately \$18,000.00 - collection is doubtful Line from Schedule A/B: 29			\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(D)
Brief desc	•		\$7,750.00	Ø	\$7,750.00	11 U.S.C. § 522(d)(5)
Accounts receivables Line from Schedule A/B:					100% of fair market value, up to any applicable statutory limit	
Brief desc	•	e and Hand Tools	\$6,500.00	Q	\$4,750.00 100% of fair market	11 U.S.C. § 522(d)(6)
Saddles, Bits for Horses and Hand Tools (1st exemption claimed for this asset) Line from Schedule A/B:40					value, up to any applicable statutory limit	
Brief desc	•	o and Hand Tools	\$6,500.00	$\overline{\mathbf{Q}}$	\$1,750.00	11 U.S.C. § 522(d)(5)
		s and Hand Tools d for this asset)			100% of fair market value, up to any	
Line from	Schedule A/B:	40			applicable statutory limit	
Brief desc	•	t Dannatt	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
	er List for Bren Ince Horse	t bennett			100% of fair market value, up to any	
Line from	Schedule A/B:	43			applicable statutory limit	
Brief desc	•		\$4,500.00	Ø	\$4,500.00	11 U.S.C. § 522(d)(5)
Roping (Schedule A/B:	47			100% of fair market value, up to any applicable statutory limit	
Brief desc	cription:		\$3,000.00	V	\$3,000.00 100% of fair market	11 U.S.C. § 522(d)(5)
	Schedule A/B:	49			value, up to any applicable statutory limit	
Brief desc	cription:	т	\$1,500.00	V	\$1,500.00 100% of fair market	11 U.S.C. § 522(d)(5)
	Schedule A/B:	49		Ц	value, up to any applicable statutory limit	
Brief desc	cription: Ihiandra Tracto	r	\$1,000.00		\$582.98 100% of fair market	11 U.S.C. § 522(d)(5)
Line from	Schedule A/B:	49			value, up to any applicable statutory limit	

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Debtor 1	Brent	Lynn	Bennett	Case number (if known)			
	First Name	Middle Name	Last Name				
Part 2:	Additional	Page					
	ption of the pro /B that lists this	perty and line on property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Check only one box for each exemption			
Brief descrip			\$900.00	\$0.00	11 U.S.C. § 522(d)(5)		
Line from So	chedule A/B:	50		value, up to any applicable statutory limit	/		

Fill in this info	ormation to iden	tify your case	:			
Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name			
Debtor 2 (Spouse, if filing)	Dawn First Name	Elise Middle Name	Bennett Last Name			
		NODTHERN				
United States Bar	nkruptcy Court for the	NORTHERN	DISTRICT OF TEXAS			
Case number (if known)					☐ Check if this is	s an
(II KIIOWII)					amended filing	9
Official Form	106D					
Schedule D:	Creditors Wh	no Have Cla	ims Secured by	v Property		12/15
			•			
			ed people are filing tog · Additional Page, fill it			
	•		d case number (if know		co, and attaon it to the	5 1011II.
-	ors have claims sec					
			court with your other sch	edules. You have noth	ning else to report on th	is form.
Yes. Fill	in all of the information	on below.				
Part 1: Lis	t All Secured Cla	nims				
	ed claims. If a credite creditor separately for			Column A	Column B	Column C
	particular claim, list the			Amount of claim	Value of collateral	Unsecured
•	ible, list the claims in	alphabetical orde	r according to the	Do not deduct the	that supports this	portion
creditor's nam	e.			value of collateral	claim	If any
2.1		Describe the secures the	property that	\$16,154.00	\$12,250.00	\$3,904.00
Drive Time			Edge (approx.	· · · · · ·		
Creditor's name 7300 E. Hampton	n Ave.	81000 mile				
Number Street						
		 As of the da	te you file, the claim is	· Check all that apply		
		Continge	•	oncor an trial apply.		
Mesa	AZ 85209	Unliquida	ated			
City	State ZIP Code	☐ Disputed				
Who owes the deb	ot? Check one.		n. Check all that apply.			
Debtor 2 only			ement you made (such a rlien (such as tax lien, m		car loan)	
Debtor 1 and D	ebtor 2 only	_	nt lien from a lawsuit	iechanic s nenj		
At least one of	the debtors and anoth	nar 🗕	cluding a right to offset)			
Check if this c		Automo	bile Loan			
to a communit	•	1 (1 11 11				
Date debt was inc	urred	Last 4 digits	of account number	0 4 0 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$16,154.00

Debtor 1	Brent	Lynn	Bennett	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 1:	J	_	s page, number them s page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.2			escribe the property that ecures the claim:	\$260,357.77	\$275,000.00			
Seterus, Inc. Creditor's name PO Box 1077 Number Street			Homestead					
Debtor Debtor Debtor At leas Check	the debt? Chec	O6143-1077 ZIP Code Ck one. Nonly ors and another	ature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit	s mortgage or secured	car loan)			
Date debt	was incurred	L	ast 4 digits of account number	7 5 4 8				

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$260,357.77

\$27<u>6,511.77</u>

Debtor '	1 Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)			
Part	2: List Others to	Be Notified for a	Debt That You	Already Listed			
example then list list the	e, if a collection agency	y is trying to collect fro here. Similarly, if you	om you for a debt y have more than or	tcy for a debt that you already listed in Part 1. For ou owe to someone else, list the creditor in Part 1, and he creditor for any of the debts that you listed in Part 1, to be notified for any debts in Part 1, do not fill out or			
1	Mackie Wolf Zientz & Mann, P.C. Name 14160 North Dallas Parkway Number Street			On which line in Part 1 did you enter the creditor? Last 4 digits of account number			
	Dallas City	TX State	75254-4319 ZIP Code	<u>-</u> -			
2	Ocwen Loan Servici Name PO Box 24738 Number Street	ing		On which line in Part 1 did you enter the creditor? Last 4 digits of account number			
	West Palm Beach	FL State	33416 ZIP Code	- -			

Fill in this inf	ormation to	identify your o	ase:							
Debtor 1	Brent	Lynn	Bennett	_						
	First Name	Middle Name	Last Name							
Debtor 2	Dawn	Elise	Bennett							
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Ba	nkruptcy Court fo	or the: NORTHER	RN DISTRICT OF T	EXAS						
Case number (if known)									Check if this is a amended filing	an
Official Form	106E/F									
Schedule E/	F: Credito	rs Who Hav	e Unsecured (Claims						12/15
Do not include an If more space is n to this page. On t	y creditors with eeded, copy the he top of any a	partially secured Part you need, f dditional pages, v	and on Schedule G: I claims that are liste ill it out, number the rrite your name and o secured Claims	d in <i>Schedule</i> entries in the b	D: C	redito s on t	ors W	ho Ho	old Claims Secur	ed by Property.
1. Do any credit	tors have priori	ty unsecured clai	ms against you?							
☐ No. Go t	•		,							
☐ Yes.										
claim. For ea show both pric more space is claim, list the	ch claim listed, in prity and nonprions needed for prion other creditors in	dentify what type o rity amounts. As r rity unsecured clai n Part 3.	creditor has more tha f claim it is. If a claim nuch as possible, list to ms, fill out the Continue instructions for this f	has both priorit the claims in alp lation Page of F	y and habe Part 1	d nonpetical of	priorit order nore t	y amo accor	ounts, list that clain	m here and or's name. If
	·	•				Γotal		n	Priority amount	Nonpriority amount
2.1						¢10	,932	00	\$19,932.00	\$0.00
LInternal Revenu	e Service				_	Ψισ	,,,,,,		Ψ13,332.00	Ψ0.00
Priority Creditor's Nam			Last 4 digits of acc	ount number	_4_	9	7	_4_		
PO Box 145566 Number Street			. When was the debt	incurred?						
			As of the date you	file. the claim i	s: Cl	neck a	all tha	at app	lv.	
			☐ Contingent	,					,	
Cincinnati	ОН	45250	Unliquidated							
City	State	ZIP Code	Disputed							
Who incurred the	debt? Check	one.	Type of PRIORITY	unsecured clai	m:					
Debtor 1 only Debtor 2 only			Domestic suppo							
Debtor 2 only Debtor 1 and D	Debtor 2 only		▼ Taxes and certa Claims for death	•			•		ent	
<u> </u>	the debtors and	another	intoxicated	i oi personai III)	ury W	ıııı c y	Ju W	51 5		
	claim is for a co	mmunity debt	Other. Specify							
Is the claim subje	ct to offset?		_							
✓ No Yes										

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	List All of You	ur NONPRIORI	TY Unsecured Clai	ms	
3. Do any	creditors have non	npriority unsecure	d claims against you?		
-				e court with you other schedules.	
☑ Ye	es				
If a cre type of	ditor has more than o	one nonpriority uns st claims already in	ecured claim, list the cre cluded in Part 1. If more	der of the creditor who holds each claim. ditor separately for each claim. For each claim list than one creditor holds a particular claim, list the out the Continuation Page of Part 2.	other creditors in
					Total claim
4.1					\$0.00
	covery online		Last 4 digits of acc	ount number <u>5</u> <u>9</u> <u>4</u> <u>2</u>	
Nonpriority Cre 3912 Optio			When was the debt	incurred? <u>4/2013</u>	
	Street			ile, the claim is: Check all that apply.	
Fort Wayn	e IN	46818	Disputed		
City	State		Type of NONPRIOR	ITY unsecured claim:	
		ck one.	☐ Student loans		
Debtor 1	•			ng out of a separation agreement or divorce	
Debtor 2	•		that you did not	report as priority claims	
<u>-</u>	I and Debtor 2 only one of the debtors a	nd another		or profit-sharing plans, and other similar debts	
ш	f this claim is for a		Other. Specify Notice Only		
_	subject to offset?	,	Notice Only		
☑ No	•				
☐ Yes					
Alvarado \	eterinary Clinic				
4.2					\$0.00
AFNI Colle			Last 4 digits of acc	ount number <u>3 6 1 6</u>	
Nonpriority Cre Po Box 30			When was the debt	incurred? <u>1/2001</u>	
	Street		As of the date you f	ile, the claim is: Check all that apply.	
·-					
			Disputed		
Bloomingt City	on IL State	61702 2 ZIP Code		ITV a a como d'alaba	
•		ck one.	Student loans	ITY unsecured claim:	
☐ Debtor 1	1 only			ng out of a separation agreement or divorce	
☑ Debtor 2	•			report as priority claims	
	I and Debtor 2 only one of the debtors a	nd another		or profit-sharing plans, and other similar debts	
			Other. Specify		
_	f this claim is for a	community dept	Notice Only		
No No	subject to offset?				
Yes					
Radiology	Assoc of North T	exas			

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsec	ured Claims Conti	nuation Page	
A 64 11 41		4.1	4.0.4		
	• •	n this page, number tr	em sequentially from the	1	Total claim
previous	page.				
4.3					\$1,494.00
Alvarado	Veterinary CI	inic	Last 4 digits of accor	unt number 5 9 4 2	
Nonpriority (Creditor's Name		When was the debt in		
6800 E. H	Hwy 67 Street			e, the claim is: Check all that apply.	
Number	Street		Contingent	e, the claim is. Oneck all that apply.	
			Unliquidated		
			— ☐ Disputed		
Alvarado)	TX 76009			
City Who inclu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	ΓY unsecured claim:	
	r 1 only	Officer offic.	☐ Student loans		
ш	r 2 only			g out of a separation agreement or divorce	
ш _	r 1 and Debtor 2	only	•	port as priority claims	
_	st one of the deb	tors and another	=	or profit-sharing plans, and other similar debts	
— Check	c if this claim is	for a community debt	✓ Other. Specify Medical Service	PS	
_	m subject to off		mouloui coi rio		
✓ No					
Yes					
Third Par	rty Collector is	Action Recovery			
		•			
4.4					\$622.00
	n Honda Finan	ice	Last 4 digits of accor	unt number <u>2 4 5 2</u>	
	Creditor's Name		When was the debt in	ncurred? 08/2009	
Number	Alpharetta Ro	1	As of the date you fil	e, the claim is: Check all that apply.	
				.,,,	
			Unliquidated		
Almhanati	·	OA 2000E	Disputed		
Alpharet City	ta	GA 30005 State ZIP Code	Type of NONDRIORI	TV uncoured alaim.	
	rred the debt?	Check one.	Type of NONPRIORIT	r unsecured claim:	
☐ Debto	r 1 only		Student loans	n out of a separation agreement or divorce	
Debto	r 2 only			g out of a separation agreement or divorce port as priority claims	
Debto	r 1 and Debtor 2	only	· ·	or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	tors and another	Other. Specify	or prome originally and outer chimal debte	
☐ Check	c if this claim is	for a community debt	Purchase Mone	ә у	
Is the clai	m subject to off	set?		-	
☑ No					
Yes					
Deficienc	cy on Honda 4	Wheeler			

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
B 0	V. NO	UDDIODITY II		to offer Beer	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	inuation Page	
After listin	ng any entries o	n this page, number the	em sequentially from th	ne e	Total alaim
previous _I	page.				Total claim
4.5					\$527.00
ب)no		Last 4 digits of acc	ount number 2 0 6 2	\$537.00
Capital C	Creditor's Name		_ Last 4 digits of acc		
PO Box 3			When was the debt		
Number	Street			file, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Salt Lake	•	UT 84130	Disputed		
City		State ZIP Code	Type of NONPRIOR	ITY unsecured claim:	
	rred the debt?	Check one.	☐ Student loans		
\square	r 1 only		Obligations arisi	ng out of a separation agreement or divorce	
<u> </u>	r 2 only	only	that you did not	report as priority claims	
_	r 1 and Debtor 2 st one of the deb	•		n or profit-sharing plans, and other similar debts	
ш					
_		for a community debt	Credit Card		
	m subject to off	set?			
☑ No					
Yes		-			
Cavairy	Portfolio Servi	ces Third party colle	ctor		
4.6					\$0.00
Cavalry	Portfolio Serv		Last 4 digits of acc	ount number 3 0 6 3	Ψ0.00
	Creditor's Name		_		
	mit Lake Dr St	te 500	When was the debt		
Number	Street		_	ile, the claim is: Check all that apply.	
			UnliquidatedDisputed		
<u>Valhalla</u>		NY 10595			
City		State ZIP Code	Type of NONPRIOR	ITY unsecured claim:	
	rred the debt?	Check one.	Student loans		
≒ ~	r 1 only r 2 only		Obligations arisi	ng out of a separation agreement or divorce	
كا	r 1 and Debtor 2	only	•	report as priority claims	
ш	st one of the deb	•		n or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify		
ш		•	Notice Only		
	m subject to off	Set?			
✓ No ☐ Yes					
ш.)				
Capital C	ne				

Debtor 1	Brent		Lynn	Bennett	Case number (if known)	
	First Name		Middle Name	Last Name		
- 10	-		DITY 11			
Part 2:	Your NO	NPRIO	RIIY Unsecu	ured Claims Conti	nuation Page	
After listin	ng any entries o	n this p	age, number the	em sequentially from the	•	Total alaim
previous p	oage.					Total claim
4.7						\$2,698.00
Chase Ca	ard			Last 4 digits of acco	unt number 1 5 2 1	
	Creditor's Name			When was the debt in		
P.O. Box						
Number	Street				e, the claim is: Check all that apply.	
_						
				Disputed		
Wilmingt	on	DE	19850			
City		State	ZIP Code	Type of NONPRIORI	ΓY unsecured claim:	
	red the debt?	Check	one.	☐ Student loans		
	r 1 only			Obligations arisin	g out of a separation agreement or divorce	
= ~	r 2 only r 1 and Debtor 2	only		that you did not re	eport as priority claims	
=	st one of the deb	-	another	☐ Debts to pension	or profit-sharing plans, and other similar debt	S
ш				Other. Specify		
_	if this claim is		mmunity debt	Credit Card		
	m subject to of	fset?				
☑ No						
Yes						
1.0						
4.8						\$1,110.00
Citi-Shell				Last 4 digits of acco	unt number <u>9 6 3 1</u>	
PO Box	Creditor's Name			When was the debt in	ncurred? 8/1999	
Number	Street			As of the date you file	e, the claim is: Check all that apply.	
					, , , , , , , , , , , , , , , , , , , ,	
				Unliquidated		
				Tisputed		
Kansas (Sity	MO State	64195 ZIP Code			
,	red the debt?	Check		Type of NONPRIORI	ΓY unsecured claim:	
	r 1 only	Oncon	01101	Student loans		
كا	r 2 only			—	g out of a separation agreement or divorce	
	r 1 and Debtor 2	only		*	eport as priority claims	•
ш	st one of the deb	•	another	= ~ ~	or profit-sharing plans, and other similar debt	5
—	if this claim is	for a co	mmunity debt	✓ Other. Specify Credit Card		
ш	m subject to of			Orean Gara		
✓ No	iii sabjeti to tii	3611				
✓ Yes						

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
	_				
Part 2:	Your NO	NPRIORITY Unsec	ured Claims Conti	nuation Page	
After listin	ng any entries o	on this nade number th	em sequentially from the		
previous	•	on this page, number th	em sequentially from the		Total claim
	pgo.				
4.9					\$0.00
Converge	ent Outsourci	ng	Last 4 digits of accor	unt number 2 4 7 4	
	Creditor's Name		When was the debt in	ncurred? 02/2015	
PO Box 9	Street		As of the date you fil	e, the claim is: Check all that apply.	
				.,,,,,	
			Unliquidated		
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Tisputed		
Renton City		WA 98057 State ZIP Code			
•	rred the debt?	Check one.	Type of NONPRIORI	I Y unsecured claim:	
✓ Debto		Chican chica	Student loans		
	r 2 only			g out of a separation agreement or divorce	
☐ Debto	r 1 and Debtor 2	only	•	eport as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the deb	otors and another	Other. Specify	or profit-straining plants, and other similar debts	
Check	k if this claim is	for a community debt	Notice Only		
Is the clair	m subject to of	fset?	,		
✓ No					
Yes					
Collector	r for Dish Netv	work			
4.10					\$0.00
Credit Co			Last 4 digits of accor	unt number <u>8 3 0 3</u>	
	Creditor's Name		When was the debt in	ncurred? 1/2001	
Po Box 7 Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			☐ Contingent	.,,,	
			Unliquidated		
Manadhan		MA 00404	Disputed		
Needhan City	<u>n</u>	MA 02494 State ZIP Code		FVd alaim.	
-	rred the debt?	Check one.	Type of NONPRIORIT	r unsecured claim:	
	r 1 only		Student loans	a cut of a congration agreement or diverse	
Debto	r 2 only			g out of a separation agreement or divorce port as priority claims	
	r 1 and Debtor 2	only	· ·	or profit-sharing plans, and other similar debts	
At leas	st one of the deb	otors and another	Other. Specify	or profit strating plans, and other similar debte	
Check	k if this claim is	for a community debt	Notice Only		
Is the clair	m subject to of	fset?			
✓ No					
Yes					
Progress	sive Insurance)			

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	ıred Claims Contir	nuation Page	
After listin		n this page, number the	em sequentially from the		Total claim
4.11	Jage.				\$187.00
Credit Sy	/stem		Last 4 digits of accou	unt number 2 0 6 1	
Nonpriority C	Creditor's Name		When was the debt in		
Number	Intry Club Ln Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent	,	
			Unliquidated Disputed		
Fort Wor	th	TX 76112			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	TY unsecured claim:	
	r 1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
	r 2 only			port as priority claims	
=	r 1 and Debtor 2 st one of the debt		•	or profit-sharing plans, and other similar debts	
–			Other. Specify		
ш	m subject to off	for a community debt	Collecting for -	Radiology Assoc North TX	
✓ No	in subject to on	JCI:			
Yes					
4.12					\$50.00
Credit Sy	etom		Last 4 digits of accou	int number 2 1 0 0	\$50.00
	Creditor's Name		When was the debt in		
	Intry Club Ln			<u></u>	
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
Fort Wor	4h	TX 76112	Disputed		
Fort Wor	un	TX 76112 State ZIP Code	Type of NONPRIORIT	TV unsecured claim:	
Who incur	red the debt?	Check one.	Student loans	Tuniscoured claim.	
	r 1 only			g out of a separation agreement or divorce	
<u> </u>	r 2 only r 1 and Debtor 2	only	that you did not re	port as priority claims	
	st one of the debt	•	= ~ ~	or profit-sharing plans, and other similar debts	
	t if this claim is	for a community debt	Other. Specify	Consultants in Radiology	
	m subject to off		oonooming to:	oonouname in Naurology	
☑ No	•				
☐ Yes					
4.13					\$38.00
Credit Sy	stem		Last 4 digits of accou	unt number 2 0 6 4	
Nonpriority C	Creditor's Name		When was the debt in	 	
1277 Cou Number	Intry Club In Street			e, the claim is: Check all that apply.	
- INGITIDEI	Street		Contingent	o, and oldin io. Oncok all that apply.	
			Unliquidated		
Fort Wor	th	TX 76112	Disputed		
City		State ZIP Code	Type of NONPRIORIT	TY unsecured claim:	
	red the debt? r 1 only	Check one.	☐ Student loans		
	r 2 only			g out of a separation agreement or divorce	
_	r 1 and Debtor 2	only	•	port as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the debt	tors and another	Other. Specify	o. F. S. G.	
☐ Check	if this claim is	for a community debt		Radiology Assoc of North TX	
	m subject to off	set?			
✓ No					
☐ Yes					

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
After listin	ng any entries o	n this page, number the	em sequentially from the		Total alaim
previous	oage.				Total claim
4.14					\$278.00
Credit Sy			Last 4 digits of accor	unt number <u>1</u> <u>2</u> <u>0</u> <u>3</u>	
	Creditor's Name Intry Club Lar	ie	When was the debt in	ncurred? <u>10/2014</u>	
Number	Street			e, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
		-	Disputed		
Fort Wor	tn	TX 76112 State ZIP Code	Type of NONPRIORI	TV unsequend claim:	
	red the debt?	Check one.	Student loans	i i diisecured ciaiiii.	
<u> </u>	r 1 only			g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2	only	•	port as priority claims	
		tors and another	Debts to pension Other. Specify	or profit-sharing plans, and other similar debts	
Check	if this claim is	for a community debt		Radiology Assoc of North TX	
Is the clai	m subject to off	set?	_	-	
✓ No					
Yes					
4.15					\$199.00
Credit Sy			Last 4 digits of acco	unt number <u>2</u> <u>0 6 6</u>	
	Creditor's Name		When was the debt in	ncurred? 10/2014	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Fort Wor	th	TX 76112	— —		
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	ΓY unsecured claim:	
☑ Debto	r 1 only		Student loans Obligations arising	g out of a separation agreement or divorce	
=	r 2 only	1.		eport as priority claims	
_	r 1 and Debtor 2	only tors and another	<u> </u>	or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify	Radiology Assoc of North TX	
_	m subject to off		Collecting for -	Radiology Assoc of North 1X	
☑ No	•				
☐ Yes					
4.16					\$157.00
Credit Sy	rstems		Last 4 digits of acco	unt number 2 0 5 8	Ψ137.00
Nonpriority C	reditor's Name		When was the debt in		
Number	Intry Club Ln Street		As of the date you fil	e, the claim is: Check all that apply.	
			_ Contingent	.,	
			Unliquidated		
Fort WOr	th	TX 76112	Disputed		
City Who incur	rad the debte	State ZIP Code	Type of NONPRIORI	ΓY unsecured claim:	
	red the debt? r 1 only	Check one.	Student loans		
	r 2 only			g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2		•	or profit-sharing plans, and other similar debts	
		tors and another	Other. Specify		
ш		for a community debt	Collecting for -	Radiology Assoc Of North TX	
Is the cial	m subject to off	3C1 (
Yes					

Debtor 1 Brent Lynn Bennett Case number (if known)	
First Name Middle Name Last Name	
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page	
After listing any entries on this page, number them sequentially from the previous page.	Total claim
4.17	\$0.00
Credit Systems intl in Last 4 digits of account number 6 4 6 3	•
Nonpriority Creditor's Name 1277 Country Club Ln When was the debt incurred? 3/2010	
Number Street As of the date you file, the claim is: Check all that apply.	
Contingent	
Unliquidated Disputed	
Fort Worth TX 76112	
Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: State ZIP Code Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only Obligations arising out of a separation agreement or divorce	
Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only	
Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Check if this claim is for a community debt Notice Only	
Is the claim subject to offset?	
☑ No Vos	
One Source Diagnostic Imaging	
4.18	\$231.00
Credit Systems intl In Nonpriority Creditor's Name Last 4 digits of account number 2 0 6 3 Nonpriority Creditor's Name	
1277 Country Club Ln when was the debt incurred? 10/2014	
Number Street As of the date you file, the claim is: Check all that apply.	
Contingent Unliquidated	
Fort Worth TX 76112 Disputed	
City State ZIP Code Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	
Debtor 1 only Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another At least one of the debtors and another Other. Specify	
Check if this claim is for a community debt Collecting for -Radiology Assoc Of North TX	
Is the claim subject to offset?	
✓ No ☐ Yes	

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Contir	nuation Page	
After listing		on this page, number th	em sequentially from the		Total claim
4.19					\$100.00
Dish Net	work		Last 4 digits of accou	int number 2 4 7 4	Ψ100.00
' - '	Creditor's Name		When was the debt in	————	
9601 S. Meridian Blvd Number Street		As of the date you file	e, the claim is: Check all that apply.		
			Contingent		
			Unliquidated		
Englewo	od	CO 80112	Disputed		
City	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Check one.	Student loans		
	r 2 only			gout of a separation agreement or divorce port as priority claims	
=	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
ш		tors and another	Other. Specify		
_		for a community debt	Services Provid	led	
No No	m subject to of	rset?			
Yes					
Third par	rty collector C	onvergent Outsourc	ing		
4.20					\$6,292.82
DKJ Too	I Grinding Co	mpany	Last 4 digits of accou	int number 2 8 6 2	
Nonpriority (Creditor's Name	1	When was the debt in		
4358 W. Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Fort Wor	th	TX 76107			
City	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Check one.	Student loans		
	r 2 only		`	gout of a separation agreement or divorce port as priority claims	
ш	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
느		otors and another	Other. Specify		
ш		for a community debt	Non-Purchase	Money	
	m subject to of	rset?			
✓ No ☐ Yes					
	of Judament	ID05-13- IS-0001286	2		

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Contin	uation Page	
After listin	•	on this page, number th	em sequentially from the		Total claim
4.21					\$1,093.00
DSRM Na	ational Bank		Last 4 digits of accou	int number 0 0 0 0	
	Creditor's Name		When was the debt in		
PO BOX Number	631 Street			e, the claim is: Check all that apply.	
			Contingent	у, от	
			Unliquidated Disputed		
Amarillo		TX 79105			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Check one.	Student loans		
<u> </u>	r 2 only			out of a separation agreement or divorce	
Debto	r 1 and Debtor 2	2 only	•	port as priority claims or profit-sharing plans, and other similar debts	
	st one of the de	btors and another	Other. Specify	in profit straining plans, and other similar debts	
☐ Check	t if this claim is	s for a community debt	Credit Card		
	m subject to of	ffset?			
✓ No					
Yes					
4.22					\$1,290.00
First Pre	mier Bank		Last 4 digits of accou	int number 1 1 9 6	
Nonpriority C	Creditor's Name		When was the debt in		
T.	nnesota Ave				
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
		_	— ☐ Disputed		
Sioux Fa	lls	SD 57104 State ZIP Code	_ <u>_</u>		
City Who incur	red the debt?	Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Chican chica	Student loans		
	r 2 only			out of a separation agreement or divorce oort as priority claims	
Debto	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
_		btors and another	Other. Specify	3 , ,	
☐ Check	t if this claim is	s for a community debt	Non-Purchase I	Money	
	m subject to of	ffset?			
✓ No					
Yes					
4.23					\$1,538.00
Grandvie	w Bank		Last 4 digits of accou	int number 0 4 1 7	<u> </u>
	Creditor's Name		When was the debt in		
PO Box 4					
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
			Disputed		
Grandvie City	ew .	TX 76050 State ZIP Code			
	red the debt?	Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only		Student loans Obligations arising	out of a congration agreement or diverse	
	r 2 only			out of a separation agreement or divorce port as priority claims	
Debto	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
☐ At leas	st one of the de	btors and another	Other. Specify		
☐ Check	t if this claim is	for a community debt	Non-Purchase I	Money	
	m subject to of	ffset?			
✓ No					
☐ Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Port 2	Vour NO	NDDIODITY Upon	oured Claims Contin	nuction Boso	
Part 2:	Tour NO	NEKIOKITT UIISE	cured Claims Contir	iuation Page	
		n this page, number	them sequentially from the		Total claim
previous	page.				i otai ciaiiii
4.24					\$546.00
Healthca	re Coll LLC		Last 4 digits of accou	ınt number 1 2 5 1	
, ,	Creditor's Name		When was the debt in		
PO Box 8	32910 Street			e, the claim is: Check all that apply.	
Number	Sireet		Contingent	c, the claim is. Oncok all that apply.	
			Unliquidated		
			— Disputed		
Phoenix		AZ 85071	_		
City Who inclu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Officer offic.	Student loans		
ш .	r 2 only		·	g out of a separation agreement or divorce	
<u> </u>	r 1 and Debtor 2	only	•	port as priority claims	
At leas	st one of the deb	tors and another	Other. Specify	or profit-sharing plans, and other similar debts	
Check	k if this claim is	for a community deb	· · ·	Affilion Texas Hill	
Is the clai	m subject to off	set?			
☑ No					
Yes					
4.25					\$303.00
Healthca	re Collections	1	Last 4 digits of accou	ınt number <u>8 3 6 2</u>	
Nonpriority (Creditor's Name		When was the debt in	ncurred? 7/2011	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Phoenix		AZ 85071	Disputed		
City		State ZIP Code	Type of NONPRIORIT	V unsecured claim:	
•	rred the debt?	Check one.	Student loans	i diisecured ciaiiii.	
☑ Debto	r 1 only			g out of a separation agreement or divorce	
Debto	r 2 only			port as priority claims	
ш	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	tors and another	Other. Specify	, 3, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	
☐ Check	k if this claim is	for a community deb		ffilion Texas-Hill	
Is the clai	m subject to off	set?			
✓ No					
☐ Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	IPRIORITY Unsecu	ıred Claims Contii	nuation Page	
After listing	•	this page, number th	em sequentially from the		Total claim
4.26					\$533.00
Huguley	Emergency Ph	ysicians	Last 4 digits of accor	unt number 1 3 2 8	<u> </u>
	Creditor's Name Freeway		When was the debt in	ncurred?	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
-			Contingent		
			Unliquidated Disputed		
Fort Wor	th	TX 76134			
Who incu	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	ΓY unsecured claim:	
	r 1 only	Chican chica	Student loans	a out of a congration agreement or diverse	
	r 2 only			g out of a separation agreement or divorce	
≝	r 1 and Debtor 2 o	•	•	or profit-sharing plans, and other similar debts	
二 。 .	st one of the debt				
_		or a community debt	Medical Service	es	
	m subject to offs	set?			
✓ No ☐ Yes					
-	t Recovery				
	•				
4.27					\$413,951.02
	Revenue Servion Creditor's Name	e	Last 4 digits of accor		
	mmerce St. Sui	te 1102	When was the debt in	ncurred?	
Number	Street		<u> </u>	e, the claim is: Check all that apply.	
			Disputed		
Dallas City		TX 75242 State ZIP Code			
	rred the debt?	Check one.	Type of NONPRIORIT	TY unsecured claim:	
☐ Debto	r 1 only		☐ Student loans	g out of a separation agreement or divorce	
_	r 2 only			port as priority claims	
<u> </u>	r 1 and Debtor 2 o	•		or profit-sharing plans, and other similar debts	
ш	st one of the debt		Other. Specify		
_		or a community debt	Taxes for 2004	- 2006	
	m subject to offs	set?			
✓ No Ves					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	PRIORITY Unsecu	red Claims Conti	nuation Page	
After listing previous		this page, number the	em sequentially from the	•	Total claim
4.28					\$1,290.45
	n Capital		Last 4 digits of acco	unt number <u>1 1 9 6</u>	
PO Box	Creditor's Name 953185		When was the debt i	ncurred?	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			Disputed		
St Louis City		MO 63195 State ZIP Code			
•	rred the debt?	Check one.		TY unsecured claim:	
☐ Debto	or 1 only		Student loans Obligations arisin	g out of a separation agreement or divorce	
	or 2 only	h.		eport as priority claims	
سنا	or 1 and Debtor 2 or st one of the debto	•		or profit-sharing plans, and other similar debts	
ш		or a community debt	Other. Specify Credit Card		
كا	im subject to offs	•	Credit Card		
✓ No	,				
Yes					
Premier	Bankcard MC				
4.29					\$1,626.00
	County Tax Of	fice	Last 4 digits of acco	unt number	
Nonpriority (Creditor's Name		When was the debt i	ncurred?	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			_ Contingent		
			UnliquidatedDisputed		
Cleburne	e	TX 76033	_ <u>-</u>		
City Who incu	rred the debt?	State ZIP Code Check one.	• •	TY unsecured claim:	
	or 1 only		Student loans Obligations arisin	g out of a separation agreement or divorce	
≒ ~	or 2 only		— •	eport as priority claims	
2	or 1 and Debtor 2 or st one of the debto	•	•	or profit-sharing plans, and other similar debts	
			Other. Specify	Manage	
كا		or a community debt	Non-Purchase	woney	
No No	im subject to offs	CL:			
Yes					

This debt is for property sold 21 years ago, and Debtors believe this debt was paid at the closing 21 years ago.

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsacu	ıred Claims Conti	nuation Page	
r art 2.	Tour No	INI MOMITI ONSCO	irea Giaillis Goiltí	ndation rage	
	•	on this page, number the	em sequentially from the	•	Total claim
previous p	oage.				
4.30					\$568.00
	t Recovery		Last 4 digits of acco	unt number <u>9 9 0 9</u>	
Nonpriority (9176 S 3 (Creditor's Name		When was the debt i	ncurred? <u>10/2014</u>	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Sandy		UT 84070			
City Who inclu	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	r 1 only	Officer offic.	Student loans	a cut of a conception agreement or diverse	
	r 2 only		— •	g out of a separation agreement or divorce	
ш.	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
ш		for a community debt	Collecting for	Huguley Emergency Physicians	
Is the cial	m subject to of	rset?			
☐ Yes					
4.31					\$0.00
	t Recovery Creditor's Name		Last 4 digits of acco		
9176 S.30			When was the debt i	ncurred? <u>12/2013</u>	
Number	Street			le, the claim is: Check all that apply.	
		LIT 0.4070	Disputed		
Sandy City		UT 84070 State ZIP Code	Type of NONDRIORI	TY unsecured claim:	
	red the debt?	Check one.	Student loans	i i unsecureu ciann.	
ш	r 1 only			g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2	only		eport as priority claims	
ш.		otors and another		or profit-sharing plans, and other similar debts	
	if this claim is	for a community debt	Other. Specify Notice Only		
_	m subject to of	-			
√ No	-				
Yes					
Huguley	Emergency P	hysicians			

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	inuation Page	
After listin	ng any entries o	n this page, number the	em sequentially from th	ne.	
previous p	•	ir uno pago, nambor un	om coquernaany mem a		Total claim
$\overline{}$	3.				
4.32					\$188.89
	Ranch and O	utdoors	Last 4 digits of acc	ount number <u>2</u> <u>3</u> <u>6</u> <u>2</u>	
	Creditor's Name		When was the debt	incurred?	
Number	Street		As of the date you	file, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Cleburne		TX 76033	Disputed		
City	;	State ZIP Code	Type of NONDRIOR	ITY unsecured claim:	
•	red the debt?	Check one.		ii i unsecureu ciaiin.	
☑ Debtor	r 1 only		Student loans Obligations arisi	ng out of a separation agreement or divorce	
Debtor	r 2 only			report as priority claims	
ш	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
At leas	st one of the debt	tors and another	Other. Specify	31	
☐ Check	t if this claim is	for a community debt	Purchase Moi	ney	
	m subject to off	set?			
☑ No					
☐ Yes					
Abstract	of Judgment 2	201200024210			
4.33					
					\$0.00
Lvnv Fun	nding IIc Creditor's Name		Last 4 digits of acc	ount number <u>0 2 0 3</u>	
PO BOX			When was the debt	incurred? <u>11/2012</u>	
Number	Street		As of the date you	ile, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Greenvill	le	SC 29603	Disputed		
City	<u>. </u>	State ZIP Code	Type of NONPRIOR	ITY unsecured claim:	
	rred the debt?	Check one.	Student loans		
☑ Debtor	•			ng out of a separation agreement or divorce	
ш	r 2 only	l	that you did not	report as priority claims	
ш	r 1 and Debtor 2	•	☐ Debts to pension	or profit-sharing plans, and other similar debts	
_	st one of the debt		☑ Other. Specify		
☐ Check	t if this claim is	for a community debt	Notice Only		
	m subject to off	set?			
☑ No					
Yes	_	_			
Windstre	am Communic	cations			

Debtor 1	Brent	Lynn	Bennett	Case number (if known)
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	nuation Page	
After listin	ng any entries o	n this page, number the	m sequentially from th		Total claim
previous p	page.				i Otal Claiiii
4.34					\$0.00
Mark Hin	es, Cain & Ass	cociatos	Last 4 digits of acco	unt number 2 3 6 2	
	Creditor's Name	ociales .	_		
508 N. Ŕi	dgeway		When was the debt		
Number	Street			e, the claim is: Check all that app	ly.
			Disputed		
Cleburne	•	TX 76033	L Disputed		
City		State ZIP Code	Type of NONPRIOR	ΓY unsecured claim:	
_ 5	red the debt?	Check one.	☐ Student loans		
	r 1 only r 2 only		~	g out of a separation agreement or	divorce
	r 1 and Debtor 2	only		eport as priority claims	
	st one of the debt	•		or profit-sharing plans, and other s	milar debts
		for a community debt	Other. Specify Notice Only		
_			Notice Only		
✓ No	m subject to off	set:			
☐ Yes					
_	Ranch and O	utdoors			
	of Judgment	u.u.u.u.u			
	g				
4.35					\$1,535.00
Medstar			Last 4 digits of acco	unt number 8 0 4 4	
	Creditor's Name		When was the debt	ncurred?	
Number	Mere Drive Street		_ As of the date you f	e, the claim is: Check all that app	dy
Number	Street		_ ☐ Contingent	es, the claim is. Check an that app	.,.
			Unliquidated		
	41	TV 70440	Disputed		
Fort Wor	tn	TX 76116 State ZIP Code			
-	red the debt?	Check one.		ΓY unsecured claim:	
☐ Debtor	r 1 only		Student loans	a out of a congration paragraph or	divorce
Debtor	r 2 only			g out of a separation agreement or eport as priority claims	divorce
لكا	r 1 and Debtor 2	•	•	or profit-sharing plans, and other s	imilar debts
	st one of the debt	tors and another	Other. Specify	Fram Graining plants, and other o	
	t if this claim is	for a community debt	Medical Service	es Provided	
Is the clair	m subject to off	set?			
☑ No	-				
☐ Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Contir	nuation Page	
After listin	•	on this page, number th	em sequentially from the		Total claim
4.36					\$6,414.00
	Trust Credit	Union	Last 4 digits of accou	unt number <u>0</u> <u>0</u> <u>0</u> <u>0</u>	
	Creditor's Name		When was the debt in	ncurred? <u>06/2007</u>	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent Unliquidated		
Houston		TX 77092	Disputed		
City		State ZIP Code	Type of NONPRIORIT	TY unsecured claim:	
	rred the debt?	Check one.	☐ Student loans		
<u> </u>	r 1 only		Obligations arising	g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2	only	•	port as priority claims	
_		otors and another		or profit-sharing plans, and other similar debts	
Check	t if this claim is	for a community debt	Other. Specify Credit Card		
Is the clair	m subject to of	set?			
✓ No ☐ Yes					
Yes					
4.37					\$8,998.00
Midland I			Last 4 digits of accou	unt number <u>6 6 6 7</u>	
Nonpriority C	Creditor's Name		When was the debt in	ncurred? 02/2014	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
San Dieg	10	CA 92123	Disputed		
City		State ZIP Code	Type of NONPRIORIT	TY unsecured claim:	
	red the debt?	Check one.	☐ Student loans		
ш	r 1 only r 2 only		`	g out of a separation agreement or divorce	
	r 1 and Debtor 2	only	•	port as priority claims	
		otors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	t if this claim is	for a community debt	· · ·	Citibank South Dakota	
	m subject to of	set?	-		
☑ No					
Yes					
4.38					\$3,189.00
Midland	Funding		Last 4 digits of accou	unt number 9 8 5 0	
	Creditor's Name		When was the debt in		
8875 Aer	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Unliquidated		
San Dieg	10	CA 92123	Disputed		
City	, -	State ZIP Code	Type of NONPRIORIT	TY unsecured claim:	
	rred the debt?	Check one.	☐ Student loans		
	r 1 only r 2 only		Obligations arising	g out of a separation agreement or divorce	
لكا	r 2 only r 1 and Debtor 2	only	-	port as priority claims	
		otors and another		or profit-sharing plans, and other similar debts	
—	t if this claim is	for a community debt	Other. Specify Collecting for C	CITIBANK N.A.	
ш	m subject to of	•	20		
✓ No	•				
Yes					

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)	
Part 2:	Your NO	NPRIORITY Unsecu	ıred Claims Contir	nuation Page	
After listin		on this page, number the	em sequentially from the		Total claim
4.39	Jage.				\$1,487.00
Midland	Fundina		Last 4 digits of accou	ınt number 9 2 0 4	<u> </u>
Nonpriority C	Creditor's Name		When was the debt in		
8875 Are	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent Unliquidated	, , , , , , , , , , , , , , , , , , , ,	
			Disputed		
San Dieg	0	CA 92123			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Chican chica	Student loans	a out of a concretion agreement or diverse	
	r 2 only			gout of a separation agreement or divorce port as priority claims	
	r 1 and Debtor 2		•	or profit-sharing plans, and other similar debts	
_		btors and another	Other. Specify		
ш		s for a community debt	Collecting for C	ITIBANK SOUTH DOKOTA	
	m subject to of	rrset?			
✓ No ☐ Yes					
4.40					\$1,349.00
Midland			Last 4 digits of accoι	ınt number <u>7 0 7 4</u>	
Nonpriority C 8875 Are	Creditor's Name		When was the debt in	ncurred? 11/2012	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
San Dieg	0	CA 92123	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	☐ Student loans		
<u> </u>	r 1 only		Obligations arising	out of a separation agreement or divorce	
=	r 2 only r 1 and Debtor 2	2 only	•	port as priority claims	
_		btors and another	= ~;	or profit-sharing plans, and other similar debts	
	if this claim is	s for a community debt	Other. Specify Collecting for C	ITID ANK	
	m subject to of		Collecting for C	MIDAN	
✓ No	,				
Yes					
4.41					4000.00
سا	F !!		l and A dimite of acces		\$826.00
Midland I	reditor's Name		Last 4 digits of accou	 	
8875 Aer			When was the debt ir	<u>• 1,2•11</u>	
Number	Street		_	e, the claim is: Check all that apply.	
			Disputed		
San Dieg	0	CA 92123			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	SHOOK OHO.	Student loans	and of a concretion are an area of an all areas	
	r 2 only			gout of a separation agreement or divorce port as priority claims	
Debto	r 1 and Debtor 2	-	•	or profit-sharing plans, and other similar debts	
At leas	st one of the de	btors and another	Other. Specify	,	
☐ Check	if this claim is	s for a community debt		Capital One Bank USA N.A.	
	m subject to of	ffset?			
☑ No					
☐ Yes					

After listing any entries on this page, number them sequentially from the previous page. 4.42 Midland Funding Number Street Sar S Aero Dr Number Street San Diego CA 92123 City Sinte ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Nonprony Creator's Name 8875 Aero Dr All Claim Size Additional Continuation Page Last 4 digits of account number 3 3 3 6 3 When was the debt incurred? 02/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only All class one of the debtors and another Check if this claim is for a community debt as the claim subject to offset? When was the debt incurred? 12/2012 San Diego CA 92123 City Sinte ZiP Code Who incurred the debt? As of the date you of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Collecting for -Citibank N.A. Last 4 digits of account number 0 1 3 6 When was the debt incurred? 12/2012 San Diego CA 92123 City Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: When was the debt incurred? 12/2012 San Diego CA 92123 City Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Sident loans Other. Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidated Disputed Type of NonPRIORITY unsecured claim: Student loans Other Specify Contingent Unliquidat	Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
After listing any entries on this page, number them sequentially from the previous page. 422 Middland Functing Nombor Stock CA 92123 Type of MONPRIORITY unsecured claim: San Diego CA 92123 Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Middland Functing Nombor Stock Check if this claim is for a community debt is the claim subject to offset? Middland Functing Nombor Stock A 43 Middland Functing Nombor Stock A 500 Debtor 1 and Debtor 2 only No Women and All Debtor 2 only No Women and Debtor 2 only Debtor 1 and Debtor 2 only No Women and Debtor 2 only Debtor 1 and Debtor 2 only No Women and Debtor 2 only No Women and Debtor 2 only No Women and Debtor 2 only Debtor 2 only No Women and Debtor 3 only		First Name	Middle Name	Last Name		
Last 4 digits of account number 3 3 6 3	Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Contin	uation Page	
Midland Funding		•	on this page, number th	em sequentially from the		Total claim
Wine was the debt incurred? 02/2013		ougo.				\$504.00
Sand Diego CA 92123 Check one. Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim subject to offset? Check one. Check if this claim is for a community debt she claim sis check all that apply. Confingent this claim is for a community debt she claim is: Check all that apply. Confingent this claim is for a community debt she claim is che				Last 4 digits of accou	nt number 3 3 6 3	
As of the date you file, the claim is: Check all that apply. Contingent Contingent Contingent Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only No Yes 4.43 Midland Funding Nonpromy Destor 6 Name Stroet Debtor 1 only Debtor 1 only Nonpromy Destor 6 Name Stroet Debtor 1 only Nonpromy Destor 6 Name Stroet Debtor 1 only Nonpromy Destor 6 Name Stroet Debtor 1 only Debtor 2 only Debtor 3 on Debtor 2 only Debtor 3 on Debtor 2 only Debtor 4 on Debtor 3 only Debtor 4 on Debtor 3 only Debtor 4 on Debtor 3 only Debtor 4 on Debtor 8 on Debtor 9 only Debtor 4 on Debtor 8 on Debtor 9 only Debtor 4 on Debtor 8 on Debtor 9 only Debtor 4 on Debtor 8 on Debtor 9 only Debtor 4 on Debtor 8 on Debtor 9 only No Yes 4.44 All least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes All least one of the debtors and another Check if this claim 1 is for a community debt is the claim 3 before 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 1 only D				When was the debt in	curred? 02/2013	
Company Comp				As of the date you file	e, the claim is: Check all that apply.	
San Diego CA 92123 City Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt is the claim subject to offset? Check one. Debtor 1 and Debtor 3 and Debtor 4 and Debtor 3 and Debtor 3 and Debtor 4 and Debtor 3 and Debtor 5 and Debtor				—		
State ZiP Code Check one. State ZiP Code Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? 12/2012 As of the date you file, the claim is: Check all that apply. Collecting for GE Capital Retail Bank State Stat	Son Dies		CA 02122	·		
Who incurred the debt? Check one. Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 2 only Debtor 3 and Debtor 3		О		Type of NONDRIORIT	V uncourred eleim	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Obligations arising out of a separation agreement or divorce that debtor 3 and Debtor 3 and Obligations arising out of a separation agreement or divorce that debts 0 other. Specify Collecting for -Citibank N.A. At least one of the debtors and another Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 4 and Debtor 5 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 9 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 9 only Debtor 1	•	red the debt?			i unsecureu ciaim.	
Debtor 2 only	<u> </u>	•			out of a separation agreement or divorce	
Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Collecting for -Citibank N.A.	=	•	reads.	~		
Check if this claim is for a community debt is the claim subject to offset? Midland Funding	_			☐ Debts to pension of	or profit-sharing plans, and other similar debts	
Is the claim subject to offset? Nombron Creditor's Name Midland Funding Nompronty Creditor's Name Mark Street Number Street San Diego CA 92123 City Debtor 1 and Debtor 2 only At 4.44 Midland Funding Nompronty Creditor's Name Street Check one. Debtor 1 only Debtor 1 and Debtor 2 only At 4.44 Midland Funding Nompronty Creditor's Name Midland Funding Nompronty Creditor's Name Sar5 Aero Dr Number Last 4 digits of account number 12/2012 Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 and Debtor 2 only At 4.44 Midland Funding Nompronty Creditor's Name Midland Funding Nompronty Creditor's Name Sar5 Aero Dr Number Street Nompronty Creditor's Name Street				<u> </u>	No.	
Additional Funding				Collecting for -C	Sitibank N.A.	
Additional Funding		iii subject to oi	1561:			
Mildland Funding Last 4 digits of account number 0	<u> </u>					
Mildland Funding Last 4 digits of account number 0						
Nonpriority Creditor's Name Street	4.43					\$317.00
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Debtor 1 only Debtor 2 only Debtor 4 and Debtor 8 Street				Last 4 digits of accou	nt number <u>0 1 3 6</u>	
As of the date you file, the claim is: Check all that apply. Contingent Disputed				When was the debt in	curred? <u>12/2012</u>	
San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Street Collecting for GE Capital Retail Bank Last 4 digits of account number 9 7 1 4 When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collecting for GE Capital Retail Bank \$182.00 Midland Funding Midland Funding When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: When was the debt incurred? 1/2014 Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 only Debtor 1 only De	T.			As of the date you file	e, the claim is: Check all that apply.	
San Diego						
San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Who more Street San Diego CA 92123 City No Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only State ZIP Code Who incurred the debtors and another Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset?				— _ · · · .		
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Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 4 least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for GE Capital Retail Bank 4.444 \$\$182.00 Midland Funding Last 4 digits of account number 9 7 1 4 When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Conlingent Unliquidated Disputed San Diego CA 92123 Other Street Other Street Unliquidated Disputed San Diego Check one. State ZiP Code Unliquidated Disputed San Diego Check one. State ZiP Code Unliquidated Disputed San Diego Check one. State ZiP Code Unliquidated Disputed San Diego Check one. State ZiP Code Unliquidated Disputed Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank Student loans Obligations arising plans, and other similar debts Other. Specify Collecting for - Citibank Other Check if this claim is for a community debt Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank	City	141 1140		Type of NONPRIORIT	Y unsecured claim:	
Debtor 2 only			Check one.	☐ Student loans		
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Collecting for GE Capital Retail Bank \$182.00 \$182.	ш	,				
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.44 State 2 of the debtors Name 8875 Aero Dr Number Street San Diego CA 92123 City State 2 iP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	<u> </u>	•	only			
Collecting for GE Capital Retail Bank Is the claim subject to offset? No Yes 4.44 Significant Funding Last 4 digits of account number 9 7 1 4 When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed San Diego CA 92123 City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No Collecting for GE Capital Retail Bank State I Bank Sites No Sites No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank	=				or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No Yes 4.44 Midland Funding Nonpriority Creditor's Name 8875 Aero Dr Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No State Calm S	Check	t if this claim is	for a community debt	· ·	E Capital Retail Bank	
Yes				J	•	
Midland Funding Nonpriority Creditor's Name 8875 Aero Dr Number Street When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No State Vir Code Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Check if this claim is for a community debt State claim subject to offset? No	☑ No					
Midland Funding Nonpriority Creditor's Name 8875 Aero Dr Number Street San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 9 7 1 4 When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collecting for - Citibank	☐ Yes					
Midland Funding Nonpriority Creditor's Name 8875 Aero Dr Number Street Street Mhen was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collecting for - Citibank	4.44					\$182.00
Nonpriority Creditor's Name 8875 Aero Dr Number Street Street San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? 1/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collecting for - Citibank	Midland	Funding		Last 4 digits of accou	nt number 9 7 1 4	
San Diego CA 92123 City State ZIP Code Disputed				_ •	_	
San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No						
San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank	Number	Street			e, the claim is. Check all that apply.	
San Diego CA 92123 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank				_ ~		
City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ✓ No ✓ No ✓ Type of NONPRIORITY unsecured claim: ✓ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting for - Citibank	O Di		0.4 00400	Disputed		
Who incurred the debt? Check one. ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No		U		Type of MONDBIODIT	V unsecured claim:	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank		red the debt?			ı unsecureu ciailli.	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ No □ Debtor 1 and Debtor 2 only □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Collecting for - Citibank	☑ Debto	r 1 only			out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Citibank	—	•			, ,	
☐ Check if this claim is for a community debt Collecting for - Citibank Is the claim subject to offset? No	=		•			
Is the claim subject to offset? ✓ No						
☑ No	ш		•	Collecting for -	Citibank	
		m subject to of	rset?			
	ر ن					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Contin	uation Page	
After listin		on this page, number th	em sequentially from the		Total claim
4.45					\$200.00
North An			Last 4 digits of accou	int number <u>6</u> <u>0</u> <u>9</u> <u>0</u>	
PO BOX	Creditor's Name		When was the debt in	curred? <u>01/2001</u>	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Clevelan	d	TN 37320			
City	الكواملة والمالية	State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	rred the debt? r 1 only	Check one.	☐ Student loans		
<u> </u>	r 2 only		~	out of a separation agreement or divorce	
_	r 1 and Debtor 2	only		port as priority claims	
	st one of the deb	otors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	t if this claim is	for a community debt		Huguley Memorial Medical Center	
Is the clai	m subject to of	fset?	J	3	
☑ No					
☐ Yes					
4.46					* 400.00
			Look A dinito of coope		\$192.00
Nonth An	nercn Creditor's Name		Last 4 digits of accou		
Po Box 8			When was the debt in	curred? <u>1/2001</u>	
Number	Street			e, the claim is: Check all that apply.	
			— ☐ Disputed		
Clevelan	d	TN 37320			
City	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Check one.	☐ Student loans		
ш	r 2 only			out of a separation agreement or divorce	
Debto	r 1 and Debtor 2	only	· ·	port as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the deb	otors and another	Other. Specify	in profit offering plans, and other offinial debte	
☐ Check	t if this claim is	for a community debt		Med 1 Huguley Medical Assoc	
	m subject to of	fset?			
☑ No					
Yes					
4.47					\$170.00
North An	nercn		Last 4 digits of accou	int number 1 8 7 2	Ψ170.00
	Creditor's Name		When was the debt in		
PO BOX				<u></u>	
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
		TN 07000	Disputed		
Clevelan	d	TN 37320 State ZIP Code		V d l !	
	red the debt?	Check one.	Type of NONPRIORIT	t unsecured ciaim:	
	r 1 only		☐ Student loans ☐ Obligations arising	out of a separation agreement or divorce	
Debto	r 2 only			port as priority claims	
=	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
ш		for a community debt	Collecting for -	luguley Memorial Mediacal	
	m subject to of	fset?			
✓ No ☐ Yes					
⊔ . 🧸					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ıred Claims Contin	uation Page	
After listin	•	on this page, number the	em sequentially from the		Total claim
4.48					\$106.00
North An			Last 4 digits of accou	int number <u>1 1 6 3</u>	
Po BOx 8	Creditor's Name		When was the debt in	curred? <u>1/2001</u>	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent Unliquidated		
		TN 07000	Disputed		
Clevelan	d	TN 37320 State ZIP Code		V d alaine	
•	red the debt?	Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only		Student loans Obligations arising	out of a separation agreement or divorce	
	r 2 only			port as priority claims	
=	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
ш		otors and another			
		for a community debt	Collecting for -	luguley Medical	
	m subject to of	rset?			
✓ No ☐ Yes					
4.49					\$87.00
North An	nercn		Last 4 digits of accou	int number <u>7 8 8 2</u>	
Nonpriority (Creditor's Name		When was the debt in	curred? 1/2001	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Clevelan	d	TN 37320	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	☐ Student loans		
ш	r 1 only			out of a separation agreement or divorce	
<u> </u>	r 2 only r 1 and Debtor 2	only	•	port as priority claims	
		otors and another		or profit-sharing plans, and other similar debts	
_		for a community debt	Other. Specify	luguley Medical	
	m subject to of		Collecting for -i	luguley Medical	
✓ No	σαυjσσε το σ.				
Yes					
4.50					*
					\$66.00
North An	nercn Creditor's Name		Last 4 digits of accou		
Po Box 8			When was the debt in	<u></u>	
Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Disputed		
Clevelan	d	TN 37320			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	OHECK OHE.	Student loans		
	r 2 only			out of a separation agreement or divorce	
ك	r 1 and Debtor 2	only		port as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the del	otors and another	Other. Specify	p. 1 onag p.ano, and onto omina dobto	
☐ Check	t if this claim is	for a community debt		luguley Medical	
Is the clai	m subject to of	fset?	-		
☑ No					
☐ Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		_
Part 2:	Your NO	NPRIORITY Unsecu	ıred Claims Conti	nuation Page	
	•	on this page, number the	em sequentially from the	3	Total claim
previous p	bage.				
4.51					\$1,025.00
	nerica Recove	ery	Last 4 digits of acco	unt number <u>2</u> <u>2</u> <u>9</u> <u>9</u>	
	Creditor's Name 200 S Ste 410)	When was the debt i	ncurred? <u>07/2013</u>	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
West Val	ley City	UT 84119			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	r 1 only	Check one.	Student loans		
ш	r 2 only		~	g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
☐ Check	t if this claim is	for a community debt	Collecting for -	Huguley Emergency Physicians	
	m subject to of	fset?			
✓ No ☐ Yes					
4.52					\$16,510.00
North An			Last 4 digits of acco	unt number <u>0 0 4 9</u>	
Nonpriority (Creditor's Name		When was the debt i	ncurred? 2001	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Clevelan	d	TN 37320			
City	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	r 1 only	Check one.	Student loans		
ш	r 2 only			g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2	•	•	or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	otors and another	Other. Specify	3,	
_		for a community debt	Collecting for	ΓX Health Hugley	
	m subject to of	fset?			
✓ No Yes					
Texas He	ealth Hugley				

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	PRIORITY Unsec	cured Claims Contir	uation Page	
After listin			hem sequentially from the	<u> </u>	
previous	• •	tino pago, nambor t	mom coquentiany nom mo		Total claim
4.53					\$750.00
North An	nerican		Last 4 digits of accou	int number 9 7 4 0	
	Creditor's Name		When was the debt in	curred? 01/2001	
PO BOX Number	Street		As of the date you file	e, the claim is: Check all that apply.	
			Contingent	.,	
			Unliquidated		
Clevelan	d	TN 37320	Disputed		
City	u .	State ZIP Code	Type of NONPRIORIT	V unsecured claim:	
•	red the debt?	Check one.	Student loans	i diisecured ciaiiii.	
☐ Debto	r 1 only			out of a separation agreement or divorce	
<u> </u>	r 2 only		·	port as priority claims	
_	r 1 and Debtor 2 c	•	☐ Debts to pension of	or profit-sharing plans, and other similar debts	
ш	st one of the debto		Other. Specify		
☐ Check	t if this claim is f	or a community deb	Collecting for T	exas Health Huguley inc	
	m subject to offs	et?			
☑ No					
Yes					
4.54					\$367.00
ببا	aorioon		Last 4 digits of accou	int number 4 2 0 7	φ307.00
Nonpriority (Creditor's Name			. - - - -	
P.O. Box			When was the debt in	<u></u>	
Number	Street		<u> </u>	e, the claim is: Check all that apply.	
			Contingent Unliquidated		
			Disputed		
Clevelan	d	TN 37320			
City	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured claim:	
	r 1 only	Check one.	☐ Student loans		
	r 2 only			out of a separation agreement or divorce	
سخا	r 1 and Debtor 2 c	nly	•	port as priority claims	
	st one of the debte	ors and another	Other. Specify	or profit-sharing plans, and other similar debts	
Check	c if this claim is f	or a community deb		uglev Hospital	
	m subject to offs	et?	2 2 2 3 . 2 . 1	.0 .7	
√ No	-				
Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	IPRIORITY Unsecu	ured Claims Conti	nuation Page	
After listin			em sequentially from the		
previous p		runo page, namber un	om soquemany from the		Total claim
4.55					\$617.00
One Sou	rce Diagnostic	Imaging	Last 4 digits of acco	unt number 6 4 6 3	ΨΟ17:00
Nonpriority C	Creditor's Name	magnig	When was the debt in		
505 N. Ri	idgeway Street			e, the claim is: Check all that apply.	
Number	Street			c, the dam is: officer all that apply.	
			Unliquidated		
Cleburne	\	TX 76033	Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	rred the debt?	Check one.	Student loans		
	r 1 only			g out of a separation agreement or divorce	
= 5.1	r 2 only r 1 and Debtor 2 o	nnly	•	port as priority claims	
	st one of the debt	•		or profit-sharing plans, and other similar debts	
—	t if this claim is f	or a community debt		PS	
_	m subject to offs	set?	moulou. co. vio		
☑ No	•				
Yes					
Credit Sy	stems Collect	ing			
4.56					¢4.447.00
إلـــا	Financial		Loot 4 digits of soos	unt number C C 4 E	\$4,447.00
	Financial Creditor's Name		Last 4 digits of acco	<u> </u>	
PO Box 4			When was the debt in	<u> </u>	
Number	Street			e, the claim is: Check all that apply.	
		MD 04070	Disputed		
Hanover City		MD 21076 State ZIP Code	Type of NONPRIORI	TV unacquired eleim.	
•	red the debt?	Check one.	Student loans	r unsecured claim.	
<u> </u>	r 1 only		—	g out of a separation agreement or divorce	
= 5.1	r 2 only	amb.		eport as priority claims	
≌	r 1 and Debtor 2 of st one of the debt	•		or profit-sharing plans, and other similar debts	
_		or a community debt	Other. Specify	Monov	
_			Non-Purchase	woney	
✓ No	m subject to offs	oct:			
V Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	ured Claims Conti	nuation Page	
After listin		on this page, number th	em sequentially from the	}	Total claim
	page.				
4.57					\$241.54
PayPal, I	nc Creditor's Name		Last 4 digits of acco	unt number <u>0 3 1 0</u>	
PO Box 4			When was the debt i	ncurred?	
Number	Street		As of the date you fi	le, the claim is: Check all that apply.	
			Contingent Unliquidated		
			UnliquidatedDisputed		
Omaha		NE 68145			
City Who incur	rred the debt?	State ZIP Code Check one.	• •	TY unsecured claim:	
	r 1 only	Chook one.	Student loans	a cut of a concretion correspond or diverse	
Debto	r 2 only			g out of a separation agreement or divorce eport as priority claims	
≌	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
_		otors and another	Other. Specify		
_		for a community debt	Services Perfo	rmed	
	m subject to of	fset?			
✓ No ☐ Yes					
4.58					\$0.00
		der, Collins & Mott	Last 4 digits of acco	unt number	
	Creditor's Name order Street, \$	Ste 640	When was the debt i	ncurred?	
Number	Street	510 040	As of the date you fi	le, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
Arlingtor	า	TX 76010			
City	rred the debt?	State ZIP Code Check one.	Type of NONPRIORI	TY unsecured claim:	
	r 1 only	Check one.	Student loans		
	r 2 only			g out of a separation agreement or divorce eport as priority claims	
□ Debto	r 1 and Debtor 2	•		or profit-sharing plans, and other similar debts	
ш		otors and another	Other. Specify		
✓ Check	k if this claim is	for a community debt	Notice Only		
	m subject to of	fset?			
✓ No ☐ Yes					
Joshua I	SD, Grandvie	w ISD, Johnson Cour	nty Taxes		

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	PRIORITY IIns	secured Claims Contir	nuation Page	
r art z.	Tour Nor	TRIORIT OIL	Secured Olaims Contin	idation rage	
After listing previous previous	• •	this page, number	er them sequentially from the		Total claim
$\overline{}$	page.				
4.59					\$103.00
	Recovery Ass		Last 4 digits of accou	ınt number <u>4</u> <u>1</u> <u>5</u> <u>2</u>	
Po Box 4	Creditor's Name		When was the debt in	ncurred? <u>5/2012</u>	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Norfolk		VA 23541	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
Who incu	rred the debt?	Check one.	☐ Student loans		
-	r 1 only			g out of a separation agreement or divorce	
<u> </u>	r 2 only	unh.		port as priority claims	
_	r 1 and Debtor 2 o			or profit-sharing plans, and other similar debts	
ш		or a community d	Other. Specify	UODO Barrio Marra da N. A	
_		-	Collecting for -	HSBC Bank Nevada N.A	
	m subject to offs	et?			
✓ No ☐ Yes					
4.60					\$1,212.00
Portfolio	Recovery Ass	ociates	Last 4 digits of accou	ınt number 3 9 6 0	
	Creditor's Name		When was the debt in	ncurred? 2/2014	
PO Box 4	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Unliquidated		
Norfolk		VA 23541	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
Who incu	rred the debt?	Check one.	Student loans		
	r 1 only		<u> </u>	g out of a separation agreement or divorce	
= 5.1	r 2 only	le .		port as priority claims	
	r 1 and Debtor 2 o st one of the debto	•	<u> </u>	or profit-sharing plans, and other similar debts	
_			Other. Specify		
		or a community d	Collecting for (CAPITAL ONE BANK USA	
	m subject to offs	et?			
✓ No ☐ Yes					
☐ Yes					

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
5 40	- v No.	VIDDIODITY II			
Part 2:	Your NO	NPRIORITY Unsect	ıred Claims Contir	nuation Page	
After listin	ng any entries o	n this page, number the	em sequentially from the		Total claim
previous	page.				I Otal Claim
4.61					\$121.00
Progress	sive Insurance		Last 4 digits of accou	int number 8 3 0 3	Ψ121.00
	Creditor's Name	•	When was the debt in		
	son Mills Road	d			
Number	Street			e, the claim is: Check all that apply.	
			— ☐ Disputed		
Mayfield	Village	OH 44143	'		
City	rred the debt?	State ZIP Code Check one.	Type of NONPRIORIT	ΓY unsecured claim:	
	r 1 only	Check one.	☐ Student loans		
ш	r 2 only			g out of a separation agreement or divorce	
<u> </u>	r 1 and Debtor 2	only	•	port as priority claims or profit-sharing plans, and other similar debts	
At leas	st one of the deb	tors and another	Other. Specify	or profit-straining plants, and other similar debts	
☐ Check	c if this claim is	for a community debt	Services provide	ded	
Is the clai	m subject to off	set?			
☑ No	-				
Yes					
Third par	rty collector C	redit Coll			
4.62					****
					<u>\$168.00</u>
	y Associates Creditor's Name	North Texas	Last 4 digits of accou		
' '	annon Street		When was the debt in	ncurred?	
Number	Street		As of the date you fil	e, the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Fort Wor	th	TX 76104	Disputed		
City		State ZIP Code	Type of NONPRIORIT	ΓY unsecured claim:	
	rred the debt?	Check one.	☐ Student loans		
≒ ~	r 1 only r 2 only		Obligations arising	g out of a separation agreement or divorce	
كا	r 1 and Debtor 2	only	•	port as priority claims	
		tors and another		or profit-sharing plans, and other similar debts	
ш		for a community debt	Other. Specify Medical Service	26	
_	m subject to off	_	Miculcal Oct VIC		
✓ No	305,501 10 011				
Yes					
AFNI Col	lections				

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	PRIORITY Unsecu	ured Claims Contin	uation Page	
After listin		this page, number th	em sequentially from the		Total claim
4.63					\$795.00
RS Clark	& Associate		Last 4 digits of accou	int number 2 9 6 3	Ψ100.00
Nonpriority C	reditor's Name		When was the debt in		
Number	ndora Dr Ste 1	50		e, the claim is: Check all that apply.	
			Contingent	,,	
			Unliquidated		
Dallas		TX 75238	Disputed		
City		State ZIP Code	Type of NONPRIORIT	Y unsecured claim:	
	red the debt?	Check one.	☐ Student loans		
	2 only			out of a separation agreement or divorce	
-	1 and Debtor 2 o	nly		port as priority claims	
	st one of the debto	ors and another	Other. Specify	or profit-sharing plans, and other similar debts	
☐ Check	if this claim is fo	or a community debt	<u> </u>	lisham Bismar M.D P.A	
Is the clair	m subject to offs	et?	J		
☑ No					
Yes					
4.64					\$3,586.00
Second F	Round LP		Last 4 digits of accou	int number 7 5 8 7	Ψ3,300.00
	reditor's Name		When was the debt in		
K .	drich Lane Sui	t			
Number	Street		Contingent	e, the claim is: Check all that apply.	
			Unliquidated		
Aa.ti.n		TV 70744	Disputed		
Austin City		TX 78744 State ZIP Code	Type of NONPRIORIT	V unsecured claim:	
	red the debt?	Check one.	Student loans	i unsecureu ciaim.	
<u> </u>	1 only			out of a separation agreement or divorce	
- .	r 2 only r 1 and Debtor 2 o	nly		port as priority claims	
	st one of the debto			or profit-sharing plans, and other similar debts	
_		or a community debt	Other. Specify	SBC Consumer Lending	
	m subject to offs		Collecting for th	SDC Consumer Lending	
✓ No					
Yes					
1.65					
4.65					\$245.00
	st Credit Syste Creditor's Name	m	Last 4 digits of accou		
	rnational parky	vay ste 1100	When was the debt in		
Number	Street			e, the claim is: Check all that apply.	
			— Disputed		
Carrollto City		TX 75007 State ZIP Code			
		Check one.	Type of NONPRIORIT	Y unsecured claim:	
	1 only		☐ Student loans	out of a separation agreement or divorce	
ك	2 only			port as priority claims	
=	1 and Debtor 2 o	•	•	or profit-sharing plans, and other similar debts	
ш	st one of the debto		Other. Specify		
ш		or a community debt	Collecting for -\	Vindstream	
	m subject to offs	et ?			
✓ No ☐ Yes					

Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name	Case number (if known)	
	T list ivalie	Widdle Name	Lastivamo		
Part 2:	Your NON	PRIORITY Unsecu	ıred Claims Conti	nuation Page	
After listir	• •	this page, number the	em sequentially from the		Total claim
4.66					\$0.00
	C. Maxwell, Ba	iley & Galyen	Last 4 digits of acco	unt number	
	Creditor's Name nmit Avenue, S	te.650	When was the debt i	ncurred?	
Number	Street			le, the claim is: Check all that apply.	
Fort Wor	th	TX 76102	Disputed		
City		State ZIP Code	Type of NONPRIORI	TY unsecured claim:	
	rred the debt? r 1 only	Check one.	Student loans		
س	r 2 only			g out of a separation agreement or divorce	
Debto	r 1 and Debtor 2 o	•	•	or profit-sharing plans, and other similar debts	
<u> </u>	st one of the debto	ors and another	Other. Specify		
_	m subject to offs	-	Notice Only		
✓ No					
Yes					
DKJ Too	I Grinding Com	pany			
4.67					
4.67	. Maine Berein		Last A divita of acco	t mumber 0 0 0	\$705.00
Nonpriority (edicine Resour Creditor's Name		Last 4 digits of acco When was the debt i		
6451 Bre	ntwood Stair, S	Ste 200		le, the claim is: Check all that apply.	
	th, Texas 705.0	0	Contingent	o, and oranin ion of the contract appropriate	
			Unliquidated Disputed		
0		710.0	Disputed		
City Who incu		State ZIP Code Check one.	• •	TY unsecured claim:	
ш	r 1 only		Student loans Obligations arisin	g out of a separation agreement or divorce	
	r 2 only r 1 and Debtor 2 o	nlv	that you did not re	eport as priority claims	
	st one of the debto	•	☐ Debts to pension ☐ Other. Specify	or profit-sharing plans, and other similar debts	
Check	c if this claim is fo	or a community debt	Medical Service	es	
	m subject to offs	et?			
✓ No ☐ Yes					
ш_	evenue Corn T	hird Party Collector	•		

Debtor 1	Brent		Lynn	Bennett	Case number (if known)				
	First Name		Middle Name	Last Name					
Part 2:	Your NO	NPRIO	RITY Unsecu	ıred Claims Contir	nuation Page				
After listin	ng any entries o	on this p	age, number th	em sequentially from the		Total claim			
previous	page.					i Otal Claiili			
4.68						\$3,278.00			
The Cow	boy Bank Of	Texas		Last 4 digits of accou	unt number 7 7 7 8				
	Creditor's Name			When was the debt in					
100 S Ma	Street			As of the date you file	e, the claim is: Check all that apply.				
Number	Olicet				o, and claim for chook an anat apply.				
-				Unliquidated					
				— ☐ Disputed					
Maypear	l	TX	76064						
City Who incur	rred the debt?	State Check	ZIP Code	Type of NONPRIORIT	Y unsecured claim:				
	r 1 only	Officer	Onc.	Student loans					
ш	r 2 only				g out of a separation agreement or divorce				
	r 1 and Debtor 2	only		•	port as priority claims				
	st one of the deb	otors and	another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					
Check	c if this claim is	for a co	mmunity debt	✓ Other. Specify Non-Purchase	Money				
ш	m subject to of		•	Non i dichase	money				
✓ No	in subject to on	13011							
Yes									
4.69						\$1,252.00			
United R	evenue Corp			Last 4 digits of accou	ınt number 6 0 5 4				
	Creditor's Name			When was the debt in					
	ngs St Sute 12	20			<u></u>				
Number	Street				e, the claim is: Check all that apply.				
				Contingent					
				Unliquidated Disputed					
Arlington	1	TX	76010	Disputed					
City		State	ZIP Code	Type of NONPRIORIT	Y unsecured claim:				
	rred the debt?	Check	one.	☐ Student loans					
	r 1 only			Obligations arising	gout of a separation agreement or divorce				
= 5.1	r 2 only r 1 and Debtor 2	only		that you did not re	port as priority claims				
□	st one of the deb	•	another		or profit-sharing plans, and other similar debts				
느				Other. Specify					
ш	t if this claim is		minunity aebt	Collecting for T	EXAS MEDICINE RESOURCES				
	m subject to of	tset?							
✓ No									
☐ Yes									

Debtor 1	Brent	Lynn	Bennett	Case number (if known)	
	First Name	Middle Name	Last Name		
D	Y NO	UDDIODITY II		to office Book	
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Cont	inuation Page	
After listin	ng any entries o	n this page, number the	m sequentially from th	ne	Total alaim
previous	page.				Total claim
4.70					\$0.00
United R	evenue Corp		Last 4 digits of acc	ount number 9 3 0 1	Ψ0.00
	Creditor's Name		When was the debt		
	ngs St Ste 120			<u></u>	
Number	Street			file, the claim is: Check all that apply.	
			− ☐ Disputed		
Arlingtor	1	TX 76010 State ZIP Code	- -		
City Who incus	rred the debt?	Check one.		ITY unsecured claim:	
	r 1 only		Student loans	na out of a concretion agreement or diverse	
Debto	r 2 only			ng out of a separation agreement or divorce report as priority claims	
	r 1 and Debtor 2	only		n or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	tors and another	Other. Specify	To promonanty plane, and other omiliar accident	
☐ Check	k if this claim is	for a community debt	Notice Only		
Is the clai	m subject to off	set?			
☑ No					
Yes					
Texas M	edicine Resou	rces			
4.71					¢607.00
			l and d dimits of ann	t	\$607.00
	eam Communio Creditor's Name	cations inc.	_ Last 4 digits of acc		
, ,	dney Parham F	Road	When was the debt		
Number	Street		_	file, the claim is: Check all that apply.	
-					
			Disputed		
Little Ro	ck	AR 72212			
City	rred the debt?	State ZIP Code Check one.	Type of NONPRIOR	ITY unsecured claim:	
	r 1 only	Officer offic.	☐ Student loans		
ш	r 2 only			ng out of a separation agreement or divorce	
ш	r 1 and Debtor 2	only	•	report as priority claims	
<u> </u>	st one of the deb	•		n or profit-sharing plans, and other similar debts	
—	k if this claim is	for a community debt	Other. Specify Services Prov	rided	
ш	m subject to off	-	23. 11000 1 101		
✓ No					
Yes					
_	nding. Third P	arty Collector			

Debtor 1	Brent	Lynn	Bennett	Case number (if known)
	First Name	Middle Name	Last Name	
Part 3:	List Others	to Be Notified Al	bout a Debt That You A	Already Listed
For exa credito debts t	ample, if a collector in Parts 1 or 2, that you listed in	tion agency is trying then list the collection	to collect from you for a de on agency here. Similarly, it additional creditors here. If	tcy, for a debt that you already listed in Parts 1 or 2. bt you owe to someone else, list the original f you have more than one creditor for any of the you do not have additional parties to be notified for
SETTLEPO	OU		On which entry in Pa	rt 1 or Part 2 did you list the original creditor?
Name 3333 Lee F	Parkway, 8th Fl	oor	Line of (Chec	ck one):
Number Street		Attorney for - Ocwe		
 Dallas			Last 4 digits of accou	and according

Cause No. C201400396

Debtor 1 Brent Lynn Bennett Case number (if known) Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$19,932.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. _	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$19,932.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. _	\$498,572.72
	6j.	Total. Add lines 6f through 6i.	6j.	\$498,572.72

Fill	in this inf	ormation to i	identify your case	:	
Deb	otor 1	Brent	Lynn	Bennett	
		First Name	Middle Name	Last Name	
	otor 2	Dawn	Elise	Bennett	
(Sp	ouse, if filing)	First Name	Middle Name	Last Name	
Unit	ted States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXA	<u>is</u>
Cas	e number				
(if k	nown)				Check if this is an amended filing
Offi	cial Form	106G			
Sch	nedule G:	Executor	y Contracts and	d Unexpired	Leases 12
	. ,	, ,	s, write your name an	,	,
	•	,	•		hedules. You have nothing else to report on this form.
	ш			•	are listed on Schedule A/B: Property (Official Form 106A/B).
i	is for (for exa	•	icle lease, cell phone).	•	tract or lease. Then state what each contract or lease s for this form in the instruction booklet for more examples of
	Person or	company with	whom you have the co	ontract or lease	State what the contract or lease is for
2.1	Person or AT&T Wi		whom you have the co	ontract or lease	State what the contract or lease is for Wireless account for Debtor and Co-Debtor.
2.1	AT&T Win	reless	whom you have the co	ontract or lease	
2.1	AT&T Win Name 1646 W. H		whom you have the co	ontract or lease	_ Wireless account for Debtor and Co-Debtor.

76031 ZIP Code

TX

Cleburne City

Fill in this info	Il in this information to identify your case:									
Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name							
Debtor 2	Dawn	Elise	Bennett							
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS							
Case number										

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do y	you h No Yes	nave any codebtors?	(If you are filing a	a joint case, d	o not list either	spouse	as a codebtor.)
2.		ıde A No.	•	o, Louisiana, Neva	ada, New Mex	ico, Puerto Ric	co, Texas	(Community property states and territories s, Washington, and Wisconsin.)
			Yes					
			In which community sta	ate or territory did	you live? _	Texas	Fill	in the name and current address of that person.
			Dawn Elise Bennet	t				
			Name of your spouse, form 6856 CR 406	ner spouse, or legal e	quivalent			
			Number Street					
			Grandview		TX	76050		
			City		State	ZIP Code		•

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this infor	mation to identify	y your case:				
Debtor 1	Brent	Lynn Bennett				
	First Name	Middle Name	Last Name	Che	eck if this is:	
Debtor 2	Dawn	Elise	Bennett		An amended filing	
(Spouse, if filing)	First Name	Middle Name	Last Name	— ⊔	All allicinated filling	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF TEXAS		🗆	A supplement showing postpetition chapter 13 income as of the following date	
Case number					chapter 13 income as of the following date.	
(if known)					MM / DD / YYYY	
Official Form 1	061					

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describ	e Employmen	۱+

١.	Fill in your employment information.		De	bto	r 1			De	btor 2 or non-filin	g spou	se
	If you have more than one job, attach a separate page with information about	Employment status			mployed lot employed				✓ Employed✓ Not employed		
	additional employers.	Occupation	Ho	Horse Trainer			Hospice Consultant				
	Include part-time, seasonal, or self-employed work.	Employer's name	Br	Brent Bennett Performance Horse			Alpha-Omega Hospice				
	Occupation may include student or homemaker, if it applies.	Employer's address	6856 CR 406 Number Street		PO Box 162041 Number Street						
			_	-	dview	TX	76050		rt Worth	TX	76161
			City	/		State	Zip Code	City	′	State	Zip Code
		How long employed ti	nere?	?	27 years				13 months		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

Car Dabter 4

Far Dahtar 2 ar

				non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$7,083.33
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$7,083.33

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Brent		ennett		Case n	umbe	er (if known)		
		First Name	Middle Name Las	st Name		For Debtor 1		For Debtor 2 or non-filing spouse	<u>. </u>	
	Сор	y line 4 here		····· →	4.	\$0.00		\$7,083.33		
5.	List	all payroll dec	ductions:							
			e, and Social Security deductions		5a.	\$0.00		\$1,370.00		
		-	ontributions for retirement plans		5b.	\$0.00		\$0.00		
		•	ntributions for retirement plans		5c.	\$0.00		\$0.00		
			ayments of retirement fund loans		5d.	\$0.00 \$0.00		\$0.00 \$855.83		
		Insurance	pport obligations		5e. 5f.	\$0.00		\$0.00		
		Union dues	port obligations		5g.	\$0.00		\$0.00		
	_	Other deduct	ions.		og.					
		Specify: Mis	c Health Deductions		5h.	F\$0.00		\$428.18		
6.		l the payroll de - 5h.	eductions. Add lines 5a + 5b + 5c +	5d + 5e + 5f +	6.	\$0.00		\$2,654.01		
7.			, ,	e 6 from line 4.	7.	\$0.00		\$4,429.32		
8.			me regularly received:		_					
	8a.	business, pro	om rental property and from operation of the second of the	Ū	8a.	\$1,515.27		\$0.00		
		gross receipts	ment for each property and business sl , ordinary and necessary business exp nly net income.	•						
		Interest and o			8b.	\$0.00		\$0.00		
	8c.		ort payments that you, a non-filing sp gularly receive	ouse, or a	8c.	\$0.00		\$0.00		
			ny, spousal support, child support, mair ment, and property settlement.	itenance,						
	8d.	Unemployme	nt compensation		8d.	\$0.00		\$0.00		
		Social Securi			8e.	\$0.00		\$0.00		
	8f.	Include cash a cash assistand (benefits unde	ment assistance that you regularly reassistance and the value (if known) or a ce that you receive, such as food stamper the Supplemental Nutrition Assistance	any non- os						
		or housing sub	osidies.							
		Specify:			8f.	\$0.00		\$0.00		
	- 3		tirement income		8g.	\$0.00		\$0.00		
	on.	Other month! Specify: Sea	y income. Isonal Ranch Work / Mileage Reii	mbursement	8h.	F\$667.00		\$2,500.00		
9.	Add	all other inco	me. Add lines 8a + 8b + 8c + 8d + 8e	+ 8f + 8g + 8h.	9.	\$2,182.27] [\$2,500.00		
10.	Calc Add	culate monthly the entries in li	income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 or non	-filing spouse.	10.	\$2,182.27]+[\$6,929.32] = [\$9,111.59
11.	Inclu frien	ude contribution nds or relatives.	ular contributions to the expenses the from an unmarried partner, members amounts already included in lines 2-10	s of your househ	old, y	our dependents, yo		enses listed in Sc		
	Spe	cify:						11.	+	\$0.00
12.			n the last column of line 10 to the amount on the Summary of Your Asse							\$9,111.59
	if it applies.								Combined monthly income	
13.	Do y ☑	you expect an No.	increase or decrease within the year	after you file t	his fo	rm?				
		Yes. Explain:	None.							

Debtor 1	Brent	Lynn	Bennett	Case number (if known)
	First Name	Middle Name	Last Name	
8a. Atta	ched Statement (E	Debtor 1)		
	,	•	ent Bennett Perform	ance Horse
FINANC	IAI REVIEW OF T			formation directly related to the business operation.)
				normation already related to the business operation.
PART A	- GROSS BUSINE	ESS INCOME FOR PREVI	OUS 12 MONTHS:	
1. (Gross Income for 1	2 Months Prior to Filing:		\$7,500.00
PART B	- ESTIMATED AV	ERAGE FUTURE GROSS	MONTHLY INCOME:	
2. (Gross Monthly Inco	ome:		\$7,500.00
PART C	- ESTIMATED AV	ERAGE FUTURE MONTH	ILY EXPENSES:	
3. 1	Net Employee Payı	roll (Other Than Debtor):		\$0.00
4. F	Payroll Taxes:			\$0.00
5. l	Jnemployment Tax	ces:		\$0.00
6. \	Worker's Compens	ation:		\$0.00
7. 0	Other Taxes:			\$0.00
8. I	nventory Purchase	es (including raw materials)):	\$784.35
9. F	Purchase of Feed/F	Fertilizer/Seed/Spray:		\$1,900.00
10.	Rent (other than d	debtor's principal residence	e):	\$0.00
11.	Utilities:			\$150.00
12.	Office Expenses a	and Supplies:		\$315.29
13.	Repairs and Main	tenance:		\$123.86
14.	Vehicle Expenses	: :		\$221.53
15.	Travel and Enterta	ainment:		\$125.79
16.	Equipment Rental	l and Leases:		\$0.00
17.	Legal/Accounting/	Other Professional Fees:		\$0.00
18.	Insurance:			\$0.00
19.	Employee Benefit	s (e.g., pension, medical,	etc.):	\$0.00
20.	Payments to be M	lade Directly by Debtor to	Secured Creditors for	
		ness Debts (Specify):		None
21.	Other (Specify):			
	Shoeing, Vet,			<u>\$829.00</u>
	Ranch Supplie	S		\$1,534.91
22.	Total Monthly Exp	penses (Add items 3 - 21)		\$5,984.73
PART D	- ESTIMATED AV	ERAGE NET MONTHLY I	NCOME:	
23.	AVERAGE NET N	MONTHLY INCOME (Subtr	act item 22 from item 2):	\$1,515.2

	ill in this inform	ation to iden	ntify your case:			I				
	Debtor 1	Brent First Name	Lynn Middle Name	Benn Last Na			s is: ended filing llement showing	postpetition		
	Debtor 2 (Spouse, if filing)	Dawn First Name	Elise Middle Name	Benn Last Na			r 13 expenses as ng date:	s of the		
	United States Bankri Case number	uptcy Court for th	ne: NORTHERN I	DISTRICT O	F TEXAS	MM / D	DD / YYYY			
	(if known)]				
0	fficial Form 10	<u>6J</u>								
S	chedule J: Yo	ur Expens	es					12/15		
nai	rrect information. If me and case numbe	more space is er (if known). A	needed, attach ano nswer every question	ther sheet to	ling together, both ar this form. On the top					
P	Part 1: Descri	be Your Hou	sehold							
1.	Is this a joint case	?								
	 No. Go to line 2. ✓ Yes. Does Debtor 2 live in a separate household? ✓ No ✓ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 									
2.	Do you have depe	endents?	No		Dependent's relati	onshin to	Dependent's	Does dependent		
	Do not list Debtor 1 Debtor 2.	l and	Yes. Fill out this for each depende		Debtor 1 or Debtor		age	live with you?		
	Do not state the de names.	ependents'						Yes No Yes		
					_			No Yes No		
								Yes No		
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes					Yes Yes		
Ŀ	Part 2: Estima	ite Your Ong	oing Monthly Ex	penses						
to		of a date after t	he bankruptcy is file	-	are using this form as a supplemental Sche		•			
	lude expenses paid ch assistance and h						Your expens	es		
4.			xpenses for your res				4.	\$1,980.00		
	If not included in	line 4:								
	4a. Real estate ta	xes					4a			
	4b. Property, hom	neowner's, or ren	ter's insurance				4b			
	4c. Home mainter	nance, repair, ar	nd upkeep expenses				4c	\$500.00		
	4d Homeowner's	association or o	ondominium dues				4d			

Deb	tor 1	Brent	Lynn	Bennett	Case number (if ki	nown)
		First Name	Middle Name	Last Name		
						Your expenses
5.	Add	litional mortgage	e payments for your resid	ence, such as home equity loans	5.	
6.	Utili	ties:				
	6a.	Electricity, heat,	natural gas		6a.	\$300.00
	6b.	Water, sewer, ga	arbage collection		6b.	\$150.00
	6c.	Telephone, cell cable services	phone, Internet, satellite, a	nd	6c.	\$450.00
	6d.	Other. Specify:	Septic		6d.	\$75.00
7.	Foo	d and housekee	ping supplies		7.	\$800.00
8.	Chil	dcare and childr	en's education costs		8.	
9.	Clot	hing, laundry, a	nd dry cleaning		9.	\$100.00
10.	Pers	sonal care produ	ıcts and services		10.	\$150.00
11.	Med	lical and dental o	expenses		11.	\$200.00
12.	Tra fare	nsportation. Incl . Do not include o	ude gas, maintenance, bus car payments.	12.	\$450.00	
13.		ertainment, clubs gazines, and boo	s, recreation, newspapers	13.	\$200.00	
14.	Cha	ritable contribut	ions and religious donati	ons	14.	\$1,800.00
15.		ırance.				
	Do r	not include insura	nce deducted from your pa	y or included in lines 4 or 20.		
	15a.	. Life insurance			15a	ā
	15b.	. Health insuran	ce		15k	
	15c.	Vehicle insura	nce		150	s. \$195.00
		. Other insurance			150	.k
16.	Tax Spe		•	our pay or included in lines 4 or 20.	16.	
17.	Inst	allment or lease				
	17a.	. Car payments	for Vehicle 1 2010 Fore	d Edge	17a	a. \$472.00
	17b.	. Car payments	for Vehicle 2		17k	o
	17c.	Other. Specify	<i>r</i> :		170	c
	17d.	Other. Specify	<i>r</i> :		170	d
18.				l support that you did not report as , Your Income (Official Form 106I).		
46	0.1			and a state of Para at M		
19.	Spe		i make to support otners	who do not live with you.	19.	

Debtor 1 Brent

Deb	tor 1	Brent	Lynn	Bennett	Case number (if know	<i>r</i> n)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or	on	
	20a.	Mortgages on o	other property		20a.	
	20b.	Real estate tax	es		20b.	
	20c.	Property, home	eowner's, or renter's insura	nce	20c.	
	20d.	Maintenance, r	epair, and upkeep expens	es	20d.	
	20e.	Homeowner's a	association or condominium	m dues	20e.	
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	hly expenses.			
	22a.	Add lines 4 thre	ough 21.		22a.	\$7,822.00
	22b.	Copy line 22 (n	nonthly expenses for Debt	or 2), if any, from Official For	m 106J-2. 22b.	
	22c.	Add line 22a a	nd 22b. The result is your	monthly expenses.	22c.	\$7,822.00
23.	Calc	ulate your mont	hly net income.			
	23a.	Copy line 12 (y	our combined monthly inc	ome) from Schedule I.	23a.	\$9,111.59
	23b.	Copy your mor	othly expenses from line 22	2c above.	23b.	\$7,822.00
	23c.		nonthly expenses from you our monthly net income.	ur monthly income.	23c.	\$1,289.59
24.	Do y	ou expect an in	crease or decrease in yo	ur expenses within the yea	r after you file this form?	
				your car loan within the year modification to the terms of y	or do you expect your mortgage our mortgage?	
		No				
		Yes. Explain he None.	re:			

Fill	l in this inf	ormanon to				
Deb	otor 1	Brent	Lynn	Bennett]	
		First Name	Middle Name	Last Name		
	otor 2 ouse, if filing)	Dawn First Name	Elise Middle Name	Bennett Last Name	-	
			or the: NORTHERN I	DISTRICT OF TEXAS		
	se number				- Charle	if this is an
(if k	nown)				_	t if this is an ded filing
Offi	cial Form	106Sum				
Sur	mmary of	Your Ass	ets and Liabili	ities and Certain Sta	tistical Information	12/1
corre sche	ect information dules after ye	on. Fill out all of	f your schedules first inal forms, you must	t; then complete the informati	both are equally responsible on on this form. If you are fili theck the box at the top of this	ng amended
						Your assets Value of what you own
1. 3	Schedule A/B	: Property (Offici	al Form 106A/B)			Value of what you own
				A/B		Value of what you own
,	1a. Copy line	e 55, Total real e	state, from Schedule A			\$277,000.00
	1a. Copy line	e 55, Total real e	state, from Schedule A			\$277,000.00
•	1a. Copy line 1b. Copy line 1c. Copy line	e 55, Total real e	state, from Schedule A	nedule A/B		\$277,000.00 \$70,892.02
•	1a. Copy line 1b. Copy line 1c. Copy line	e 55, Total real e e 62, Total perso e 63, Total of all	state, from Schedule A	nedule A/B		\$277,000.00 \$70,892.02
Pai	1a. Copy line 1b. Copy line 1c. Copy line rt 2: Su	e 55, Total real e e 62, Total perso e 63, Total of all mmarize You Creditors Who Ha	state, from Schedule Anal property, from Schedule Aproperty on Schedule Arr Liabilities	A/B A/B Y Property (Official Form 106D)		\$277,000.00 \$70,892.02 \$347,892.02 Your liabilities Amount you owe
Par 22. 3	1a. Copy line 1b. Copy line 1c. Copy line 1c. Support 2: Support 2	e 55, Total real e e 62, Total perso e 63, Total of all mmarize You Creditors Who Ha total you listed i	nal property, from Schedule And property on Schedule And Inchedule And I	A/B A/B y Property (Official Form 106D) of claim, at the bottom of the lass ms (Official Form 106E/F)		\$277,000.00 \$70,892.02 \$347,892.02 Your liabilities Amount you owe \$276,511.77
Par 22. 33. 3	1a. Copy line 1b. Copy line 1c. Copy line 1c. Support 2: Support 2	e 55, Total real e e 62, Total perso e 63, Total of all perso e 63, Total of all perso e 63, Total of all perso creditors Who Have total you listed in total you listed in total claims from	nal property, from Schedule And property on Schedule And Inchedule And I	y Property (Official Form 106D) of claim, at the bottom of the last ms (Official Form 106E/F) cured claims) from line 6e of Sc	st page of Part 1 of Schedule D.	Your liabilities Amount you owe \$277,000.00 \$70,892.02 Your liabilities Amount you owe \$276,511.77 \$19,932.00

Schedule I: Your Income (Official Form 106I)

Case 16-41303-mxm11 Doc 1 Filed 04/01/16 Entered 04/01/16 16:04:25 Page 70 of 101

Debtor 1		Brent	Lynn	Bennett	Case number (if known)		
P	art 4	First Name Answer T	Middle Name hese Questions fo	Last Name r Administrative an	d Statistical Records		
6.			kruptcy under Chapter				
ο.	Π				s box and submit this form to the court with y	our other schedules.	
	Ø	Yes					
7.	What kind of debt do you have?						
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
8.		From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.					
9.	Сор	y the following sp	ecial categories of cla	ims from Part 4, line 6 o	of Schedule E/F:		
					Total claim		
	Fron	n Part 4 on Sched	dule E/F, copy the follo	owing:			
	9a.	Domestic support	obligations. (Copy line	6a.)			
	9b.	Taxes and certain	other debts you owe th	e government. (Copy line	e 6b.)	<u> </u>	
	9c.	Claims for death of	or personal injury while y	ou were intoxicated. (Co	ppy line 6c.)		
	9d.	Student loans. (C	opy line 6f.)				
	9e.	Obligations arising priority claims. (C		reement or divorce that y	ou did not report as	_	
	9f.	Debts to pension	or profit-sharing plans, a	and other similar debts. ((Copy line 6h.) +	<u> </u>	
	9g.	Total. Add lines	9a through 9f.				

Fill in this information to identify your case:					
Debtor 1	Brent First Name	Lynn Middle Name	Bennett Last Name		
Debtor 2	Dawn	Elise	Bennett		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS		
Case number (if known)					Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I h true and correct.	ave read the summary and schedules filed with this declaration and that they are
W. (17)	W / / D = Till = D = 11
X /s/ Brent Lynn Bennett Brent Lynn Bennett, Debtor 1	X /s/ Dawn Elise Bennett Dawn Elise Bennett, Debtor 2
Date <u>04/01/2016</u> MM / DD / YYYY	Date <u>04/01/2016</u> MM / DD / YYYY

F	ill in this info	ormation to i	dentify your case	:		
D	ebtor 1	Brent	Lynn	Bennett		
		First Name	Middle Name	Last Name		
	ebtor 2	Dawn	Elise	Bennett		
(8	Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court fo	or the: NORTHERN D	DISTRICT OF TEXAS	_	
C	ase number				☐ Check if this	ie an
(if	known)				amended filir	
 ∩f	ficial Form	107				
_					-	
St	atement o	t Financial	Affairs for Ind	lividuals Filing for	r Bankruptcy	04/16
you	ır name and ca	se number (if kr	nown). Answer every	=	m. On the top of any additional pages,	write
1.	What is your of Married ☐ Not marrie	current marital s	status?			
2.	☑ No	•		other than where you live		
	☐ Yes. List a	all of the places	you lived in the last 3 y	ears. Do not include where	e you live now.	
3.		• •	•	• .	a community property state or territor uisiana, Nevada, New Mexico, Puerto Ric	•

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Brent Lynn First Name Middle Name		Bennett Case num Last Name		mber (if known)			
P a 4.	Fill in th	ne total amount of ir	e from employm		inesses, including par		endar years?
	□ No	s. Fill in the details.	·	isome that you receive toge	unor, not it only oned u	naci 26500 1.	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ary 1 of the current u filed for bankrup	-	Wages, commissions, bonuses, tips✓ Operating a business	\$23,805.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$20,869.58
		calendar year: December 31, 20	015) YYY	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$85,000.00	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$72,000.00
		endar year before to December 31, 20		Wages, commissions, bonuses, tips✓ Operating a business	\$90,550.00	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$58,465.00
5.	Include unempl	income regardless loyment; and other p mbling and lottery w	of whether that i	yments; pensions; rental inc	s of other income are ome; interest; dividen	alimony; child support; Socia ds; money collected from law eceived together, list it only o	vsuits; royalties;
	☑ No	ch source and the g		n each source separately. C	Oo not include income	that you listed in line 4.	

Deb	otor 1	Brent	Lynn Middle Nome	Bennett	Case number (if known)
D.	art 3:	First Name	Middle Name	Last Name Made Refore You F	Filed for Bankruptcy
6.			•	imarily consumer debts	·
	▼ No.	Neither De	btor 1 nor Debtor 2 has	•	ebts. Consumer debts are defined in 11 U.S.C. § 101(8) as
		During the	90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$6,425* or more?
		⋈ No. Go	to line 7.		
		— to	tal amount you paid that	creditor. Do not include	of \$6,425* or more in one or more payments and the expanyments for domestic support obligations, such as any any any such as any attorney for this bankruptcy case.
		* Subject to	adjustment on 4/01/19	and every 3 years after	hat for cases filed on or after the date of adjustment.
	☐ Yes	. Debtor 1 o	r Debtor 2 or both have	primarily consumer d	ebts.
		During the	90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$600 or more?
		☐ No. Go	to line 7.		
		cr	editor. Do not include p		of \$600 or more and the total amount you paid that pport obligations, such as child support and alimony. is bankruptcy case.
7.	Insiders corporat agent, ir	include your rations of which	elatives; any general pa you are an officer, direct or a business you operat	artners; relatives of any gotor, person in control, or	nent on a debt you owed anyone who was an insider? peneral partners; partnerships of which you are a general partner; powner of 20% or more of their voting securities; and any managing 1 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all paym	nents to an insider.		
8.		I year before ed an insider?		y, did you make any pa	ayments or transfer any property on account of a debt that
	Include	payments on o	debts guaranteed or cos	igned by an insider.	
	✓ No ☐ Yes	. List all paym	nents that benefited an in	nsider.	
P	art 4:	Identify L	egal Actions, Repo	ossessions, and Fo	preclosures
9.	Within 1 List all s	year before such matters, in	you filed for bankrupto	y, were you a party in	any lawsuit, court action, or administrative proceeding? ons, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	. Fill in the de	tails.		

Deb	tor 1	Brent	Lynn Middle Nome		nnett	Case number (if kr	nown)	
10.	seized,	First Name year before you or levied? Il that apply and the		ruptcy, was ar	Name	perty repossessed, foreclosed	l, garnished, attac	hed,
		Go to line 11. Fill in the inform	nation below.					
11.					-	cluding a bank or financial ins e you owed a debt?	stitution, set off ar	ny
	✓ No ☐ Yes	. Fill in the detail	S.					
12.		year before you s, a court-appoi				perty in the possession of an a ial?	assignee for the b	enefit of
	✓ No ☐ Yes							
Pa	art 5:	List Certain	Gifts and Co	ontribution	s			
13.	Within 2	years before yo	ou filed for banl	kruptcy, did y	ou give any gi	fts with a total value of more t	han \$600 per pers	on?
	✓ No ☐ Yes	. Fill in the detail	s for each gift.					
14.	Within 2 to any o		ou filed for banl	kruptcy, did ye	ou give any gi	fts or contributions with a tota	l value of more th	an \$600
	□ No ☑ Yes	. Fill in the detail	s for each gift or	r contribution.				
		ributions to cha re than \$600	rities		Describe wh Tithe	at you contributed	Date you contributed	Value
	dar Cros	s Cowboy Chu	urch				Weekly	\$415.00
Num	ber Stre	eet						
City			State	ZIP Code				
Pa	art 6:	List Certain	Losses					
15.		year before you saster, or gamb		ruptcy or sinc	e you filed for	bankruptcy, did you lose any	thing because of t	heft, fire,
	□ No ✓ Yes	. Fill in the detail	s.					
	cribe the loss occ	property you lo urred	est and how	Include the	e amount that in	e coverage for the loss insurance has paid. List pending 33 of Schedule A/B: Property.	Date of your loss	Value of property lost \$600.00
Wat	ter dam	age to carpet o	due to flooding	g				

from weather

Official Form 107

Debtor 1	Brent		Lynn	Bennett	Case number (if	known)		
	First Name		Middle Name	Last Name				
Part 7:	List Cert	ain Pa	ayments or	Transfers				
				ptcy, did you or anyone else		or transfer any pro	perty to	
anyo	ne you consulte	ed abo	ut seeking ba	nkruptcy or preparing a bank	ruptcy petition?			
Includ	de any attorneys	, bankr	uptcy petition p	preparers, or credit counseling	agencies for services requi	red for your bankrupt	су.	
ПΝ	lo							
_	es. Fill in the de	etails.						
_				Description and value of a	ny property transferred	Date payment	Amount of	
Burt E. P	owell			boomphon and value of a	ny proporty transferred	or transfer was	payment	
Person Who				_		made		
7 E. Hend	derson					7/6/2015	\$500.00	
Number S	Street			_			_ ·	
				=			_	
Cleburne	•	TX State	76031 ZIP Code	=				
. ,								
Email or web	bsite address			_				
Person Who	Made the Paymer	nt, if Not	You	_				
				Description and value of a	ny property transferred	Date payment	Amount of	
Areya Ho	older Aurzada			·		or transfer was	payment	
Person Who				_		made		
	irport Freewa	у		_			\$10,000.00	
	Street							
Suite 800)			_				
Irving		TX	75062					
City		State	ZIP Code	_				
Email or web	bsite address			_				
			.,	_				
Person Who	Made the Paymer	it, if Not	You					
				Description and value of a	ny property transferred	Date payment	Amount of	
Access C	Counseling, In	c.		_		or transfer was made	payment	
Person Who	o Was Paid							
Number S	Street			_		3/29/2016	\$34.00	
				_				
City		State	ZIP Code	_				
F 1	batta adda			_				
⊏ma⊪ or web	bsite address							
Person Who	Made the Paymer	nt, if Not	You	_				

Deb	tor 1	Brent First Name	Lynn Middle Name	Bennett Last Name		Case number (if known)		
17.	anyone	who promised	-	h your creditors or to	_	your behalf pay or transfer a ts to your creditors?	iny property to	
	✓ No	s. Fill in the deta	ils.					
18.			-	tcy, did you sell, trac of your business or		transfer any property to any s?	one, other than	
		-		nade as security (such re already listed on th		security interest or mortgage of	on your property).	
	✓ No ☐ Yes	s. Fill in the detai	ils.					
19.		-	•	ptcy, did you transfe alled asset-protection		o a self-settled trust or simila	ar device of which	
	Yes	. Fill in the detai	ils.					
Pa	art 8:	List Certair	n Financial Acco	unts, Instrument	s, Safe Depo	sit Boxes, and Storage	Units	
20.			ou filed for bankrupto noved, or transferred		al accounts or ir	struments held in your name	e, or for your	
			•	other financial accoun itions, and other finan		deposit; shares in banks, cred	lit unions, brokerage	
	✓ No ☐ Yes	s. Fill in the detai	ils.					
21.	-		id you have within 1 other valuables?	year before you filed	d for bankruptcy	, any safe deposit box or oth	er depository	
	✓ No	s. Fill in the detai	ils.					
22.	Have ye	ou stored prope	rty in a storage unit	or place other than y	your home withi	n 1 year before you filed for l	pankruptcy?	
	Yes	s. Fill in the detai	ils.					
Pa	art 9:	Identify Pro	perty You Hold	or Control for So	omeone Else			
23.	-	hold or control in trust for som		omeone else owns?	Include any pro	perty you borrowed from, ar	e storing for,	
	□ No ☑ Yes	s. Fill in the detai	ils.					
			Wher	e is the property?		Describe the property	Value	
	nn Hur er's Name					Horse	\$1,000.00	
				CR 406				
Num	ber Str	eet	Numb	Number Street				
				ndview TX				
City		State	ZIP Code City	Stat	e ZIP Code			

Debtor 1	Brent First Name	Lynn Middle Nai	Benne me Last Nan			Case number (if known)	
			Where is the prop	erty?		Describe the property	Value
Landyn F Owner's Nan						Pony	\$400.00
Owner's Nan	ile		0050 00 400				
Number S	Street		Number Street			<u> </u>	
			Grandview	тх	76050	_	
City	State	ZIP Code	City	State	ZIP Code	_	
			Where is the prop	erty?		Describe the property	Value
Custome	rs					Customer horses that are	
Owner's Nan	ne		6856 CR 406			being trained or boaded - approximately 17 horses	
Number S	Street		Number Street			_	
			Grandview	тх	76050		
City	State	ZIP Code	City	State	ZIP Code	_	
Part 10	Give Detail	s About En	vironmental Info	ormatio	n		
For the pu	rpose of Part 10,	the following	definitions apply:				
hazard	ous or toxic subs	tance, wastes	, or material into the	e air, land	d, soil, surfa	cerning pollution, contamination, rel ce water, groundwater, or other med wastes, or material.	
	-		operty as defined u ilize it, including di	-		ntal law, whether you now own, oper	ate, or
			n environmental lav			lous waste, hazardous substance, to	oxic
Report all	notices, releases	, and proceedi	ings that you know	about, re	gardless of	when they occurred.	

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

✓ No✓ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

☑ No

Yes. Fill in the details.

Debtor 1	Brent	Lynn	Bennett	Case number (if known)
26. Have		Middle Name any judicial or ac	Last Name Iministrative proceeding	under any environmental law? Include settlements and
✓ N	o es. Fill in the details.			
Part 11	Give Details	About Your B	usiness or Connection	ons to Any Business
27. Withir busin		filed for bankrup	otcy, did you own a busin	ess or have any of the following connections to any
]]]]	A member of a lim A partner in a part An officer, directo	nited liability comp mership r, or managing ex	n a trade, profession, or oth any (LLC) or limited liability ecutive of a corporation g or equity securities of a c	
	o. None of the above es. Check all that ap		art 12. n the details below for eac	h business.
	nnett Perfomance		cribe the nature of the bu se training	siness Employer Identification number Do not include Social Security number or ITIN.
Business Nat		Nom	o of accountant or bookl	EIN:
	Street		e of accountant or bookk n Bennett	Dates business existed
				From 1/20/2012 To Present
Grandvie City		6050 P Code		
all fin. ✓ N	ancial institutions, on ones. Fill in the details	reditors, or othe	• •	cial statement to anyone about your business? Include
that answer	ers are true and corr	ect. I understan n with a bankrup	d that making a false stat otcy case can result in fin	ttachments, and I declare under penalty of perjury ement, concealing property, or obtaining money or es up to \$250,000, or imprisonment for up to 20 years,
	ent Lynn Bennett ynn Bennett, Debtor 1	l	X /s/ Dawn Elise Dawn Elise Ben	
Date _	04/01/2016		Date04/01	<u>/2016</u>
Did you at	tach additional page	es to Your Statem	ent of Financial Affairs fo	or Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes				
Did you pa	ay or agree to pay so	omeone who is n	ot an attorney to help you	ı fill out bankruptcy forms?
✓ No ☐ Yes. N	Name of person			Attach the Bankruptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

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, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this inf	ormation to	identify your case	:
Debtor 1	Brent	Lynn	Bennett
	First Name	Middle Name	Last Name
Debtor 2	Dawn	Elise	Bennett
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS
Case number			
(if known)			

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders 12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

1	Internal Revenue Creditor's name 1100 Commerce S Number Street			What is the nature of the claim? Taxes for 2004 - 2006 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Unsecured claim \$413,951.02	
	Dallas	TX	75242	None of the above apply		
	City	State	ZIP Code	 Does the creditor have a lien on your property? ✓ No 		
	Contact			Yes. Total claim (secured and unsecured):	-	
	Contact phone			Value of security — Unsecured claim:		
2	Internal Revenue	Service		What is the nature of the claim? Taxes	\$19,932.00	
	Creditor's name PO Box 145566 Number Street			As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		
	Cincinnati	ОН	45250	None of the above apply		
	City	State	ZIP Code	 Does the creditor have a lien on your property? ✓ No 		
	Contact			Yes. Total claim (secured and unsecured):	_	
	Contact phone			Value of security	_	

Debtor '	1 Brent	Lynn	Bennett	Case	e number (if known)						
	First Name	Middle Name	Last Name			Unsecured claim					
						Onsecured Claim					
3	North American	1	What is the nature	of the claim?	Collecting for TX Health Hu	\$16,510.00					
	Creditor's name PO Box 8005		As of the date you	file, the claim is:	Check all that apply.						
	Number Stre	eet	Contingent								
			Unliquidated Disputed								
		=11	■ Disputed None of the about	ove apply							
	Cleveland City	TN 37320 State ZIP Code	Does the creditor h		r property?						
	Oity	State Zii Gode	✓ No		р. оролу						
	Contact		🗀	im (secured and u	nsecured):						
			Value of	security							
	Contact phone		Unsecur	ed claim:							
А	Midland Fundin	g	What is the nature	of the claim?	Collecting for Citibank Sou	\$8,998.00					
-	Creditor's name		As of the date you	file, the claim is:	Check all that apply.						
	8875 Aero Drive		Contingent								
	Number Site	et .	Unliquidated								
			— ☐ Disputed								
	San Diego	CA 92123	None of the abo								
	City	State ZIP Code	Does the creditor h No	ave a lien on you	r property?						
	Contact		Yes. Total cla	Yes. Total claim (secured and unsecured):							
			Value of	Value of security —							
	Contact phone		Unsecur	red claim:							
5	Members Trust	Credit Union	What is the nature	\$6,414.00							
5	Creditor's name		As of the date you	_	Credit Card Check all that apply.						
	2315 Mangum F		— ☐ Contingent	.,							
	Number Stre	eet	Unliquidated								
			— Disputed								
	Houston	TX 77092	None of the abo								
	City	State ZIP Code	Does the creditor h	ave a lien on you	r property?						
	Contact		☑ No □ Yes. Total cla	im (secured and u	nsecured):						
				security							
	Contact phone			ed claim:							
	DKJ Tool Grind	ing Company	What is the nature	of the claim?	Non-Purchase Money	\$6,292.82					
6	Creditor's name	g company	As of the date you	_	Check all that apply.						
	4358 W. Vickery		☐ Contingent	,	oncon an anat apply.						
	Number Stre	eet	Unliquidated								
			— Disputed								
	Fort Worth	TX 76107	None of the abo								
	City	State ZIP Code	Does the creditor h	ave a lien on you	r property?						
	Contact		☑ No □ Yes. Total cla	im (secured and u	nsecured):						
			Value of	,							
	Contact phone			ed claim:							

Debtor 1	Brent	Lynn	Bennett	Case nur	mber (if known)	
	First Name	Middle Name	Last Name			Unsecured claim
	Onemain Finan	cial	What is the nature of	f the claim? No	n-Purchase Money	\$4,447.00
7	Creditor's name	Ciai	As of the date you fil		Check all that apply.	Ψτ,ττ1.00
	PO Box 499		— ☐ Contingent	e, the claim is.	Check all that apply.	
	Number Stre	eet	Unliquidated			
			— ☐ Disputed			
	Hanover	MD 21076	None of the abov	re apply		
	City	State ZIP Code	 Does the creditor have 	ve a lien on your pr	operty?	
			_	,		
	Contact			n (secured and unse	cured):	
	Contact phone		Value of s	•		
			Unsecured	d claim:		
Ω	Drive Time		What is the nature of	the claim? Aut	tomobile Loan	\$3,904.00
0	Creditor's name		As of the date you fil	e, the claim is:	Check all that apply.	
	7300 E. Hampto		— ☐ Contingent	•	,	
	Number Stre	eet	Unliquidated			
			— □ Disputed			
	Mesa	AZ 85209	None of the abov			
	City	State ZIP Code	Does the creditor ha	ve a lien on your pr	operty?	
	Contact		∏ No	n (secured and unse	cured): \$16,154.00	
	Contact		✓ Yes. Total clain Value of s	•	- \$12,250.00	
	Contact phone		Value of s Unsecured	•	\$3,904.00	
			Onscource	z olami.	Ψο,ου-1ου	
0	Second Round	LP	What is the nature of	the claim? Co	llecting for HSBC Consu	\$3,586.00
9	Creditor's name		As of the date you fil		Check all that apply.	
	4150 Friedrich I		Contingent			
	Number Stre	eet	Unliquidated			
			— □ Disputed			
	Austin	TX 78744	None of the abov			
	City	State ZIP Code	Does the creditor ha	ve a lien on your pr	operty?	
	Contact		☑ No □ Yes. Total clain	n (secured and unse	cured).	
	oomaa.		Value of s	•		
	Contact phone		Unsecured	•		
10	The Cowboy Ba	ank Of Texas	What is the nature of		n-Purchase Money	\$3,278.00
	100 S Main St		As of the date you fil	e, the claim is:	Check all that apply.	
	Number Stre	eet	Contingent ☐ Unliquidated			
			— Disputed			
	Marmani	TV 70004	None of the abov	ve apply		
	Maypearl City	TX 76064 State ZIP Code	Does the creditor have		operty?	
	J.,	Julio Zii Oode	No			
	Contact			n (secured and unse	cured):	
			Value of s	ecurity		
	Contact phone		Unsecured	d claim:		

Debtor '	1 Brent First Name	Lynn Middle Name	Bennett Case number (if known)	
	riistivairie	Middle Name	Lastivalite	Unsecured claim
11	Midland Funding		What is the nature of the claim? Collecting for CITIBANK N.	\$3,189.00
	Creditor's name		As of the date you file, the claim is: Check all that apply.	
	8875 Aero Dr		☐ Contingent	
	Number Street		Unliquidated	
			— Disputed	
	San Diego	CA 92123	None of the above apply	
	City	State ZIP Code	Does the creditor have a lien on your property?	
	•		☑ No	
	Contact		Yes. Total claim (secured and unsecured):	
			Value of security —	
	Contact phone		Unsecured claim:	
_	Chase Card		What is the nature of the claim? Credit Cord	¢2 609 00
12	Chase Card Creditor's name		What is the nature of the claim? Credit Card	\$2,698.00
	P.O. Box 15298		As of the date you file, the claim is: Check all that apply.	
	Number Street		Contingent	
			Unliquidated	
			— Disputed	
	Wilmington	DE 19850	None of the above apply	
	City	State ZIP Code	── Does the creditor have a lien on your property? ☑ No	
	Contact		Yes. Total claim (secured and unsecured):	
			Value of security —	
	Contact phone		Unsecured claim:	
	lab	T 055	March of the Control New Power March	#4.000.00
13	Johnson County Creditor's name	Tax Office	What is the nature of the claim? Non-Purchase Money	\$1,626.00
	2 N Mill Steet		As of the date you file, the claim is: Check all that apply.	
	Number Street		Contingent	
			Unliquidated	
			— 💆 Disputed	
	Cleburne	TX 76033	None of the above apply	
	City	State ZIP Code	Does the creditor have a lien on your property?	
	0		Ø No	
	Contact		Yes. Total claim (secured and unsecured):	
	Contact phone		Value of security	
	Contact priorie		Unsecured claim:	
1.1	Grandview Bank		What is the nature of the claim? Non-Purchase Money	\$1,538.00
14	Creditor's name		As of the date you file, the claim is: Check all that apply.	
	PO Box 449		— Contingent	
	Number Street		Unliquidated	
			— Disputed	
	Grandviou	TV 76050	None of the above apply	
	Grandview City	TX 76050 State ZIP Code	Does the creditor have a lien on your property?	
	<i>j</i>	J.0.0 Z.II 0006	✓ No	
	Contact		Yes. Total claim (secured and unsecured):	
			Value of security	
	Contact phone		Unsecured claim:	

Debtor	1 Brent	Lynn	Bennett	Case	number (if known)	
	First Name	Middle Name	Last Name			Unsecured claim
_						
15	Medstar Creditor's name		What is the nature	_	Medical Services Provided	\$1,535.00
	2900 Alta Mere I	Orive	As of the date you	file, the claim is:	Check all that apply.	
	Number Street		Contingent			
			Unliquidated			
			— ☐ Disputed ✓ None of the about	ove annly		
	Fort Worth	TX 76116 State ZIP Code	None of the aboutDoes the creditor h		nroperty?	
	City	State ZIP Code	✓ No	ave a hell on you	property:	
	Contact			im (secured and ur	nsecured):	
			Value of	•	<u></u>	
	Contact phone		Unsecur	•		
16	Alvarado Veterir	narv Clinic	What is the nature	of the claim?	Medical Services	\$1,494.00
16	Creditor's name	,	As of the date you	file. the claim is:	Check all that apply.	• • • • • • • • • • • • • • • • • • • •
	6800 E. Hwy 67		☐ Contingent	•	,	
	Number Stree	et	Unliquidated			
			— Disputed			
	Alvarado	TX 76009	✓ None of the about	ove apply		
	City	State ZIP Code	Does the creditor h	ave a lien on your	property?	
			🗹 No	San da a successi a su		
	Contact		ш	im (secured and ur	isecurea):	
	Contact phone		Value of	•	-	
	·		Unsecur	ed claim:		
	Midland Funding	1	What is the nature	of the claim?	Collecting for CITIBANK SC	\$1,487.00
17	Creditor's name	<u> </u>	As of the date you		Check all that apply.	<u> </u>
	8875 Areo Dr		☐ Contingent	mo, and diaminion	chock all that apply.	
	Number Stree	et	Unliquidated			
			— Disputed			
	San Diego	CA 92123	None of the abo	ove apply		
	City	State ZIP Code	 Does the creditor h 	ave a lien on your	property?	
			🗹 No	. ,		
	Contact		_	im (secured and ur	nsecured):	
	Contact phone		Value of	•	<u> </u>	
	·		Unsecur	ed claim:		
	Military of Francisco	_	140 41 41 4		O - III 1 1 1 OITID ANIX	* 4 0 40 00
18	Midland Funding Creditor's name	3	What is the nature	_	Collecting for CITIBANK	\$1,349.00
	8875 Areo Dr		As of the date you t	rile, the claim is:	Check all that apply.	
	Number Stree	et	Unliquidated			
			— Disputed			
	San Diego	CA 92123	None of the abo	ove apply		
	San Diego City	State ZIP Code	 Does the creditor h 		property?	
	•		☑ No	•	· · ·	
	Contact		Total cla	im (secured and ur	nsecured):	
	Contact phase		Value of	security		
	Contact phone		Unsecur	ed claim:		

Debtor 1	Brent	Lynn	Bennett C	case number (if known)	
	First Name	Middle Name	Last Name		Unsecured claim
19	Jefferson Capita	al	What is the nature of the claim?	Credit Card	\$1,290.45
19	Creditor's name		As of the date you file, the claim	is: Check all that apply.	
	PO Box 953185		— Contingent	oriotic air triat appriy.	
	Number Stree	et	Unliquidated		
			— Disputed		
	St Louis	MO 63195	None of the above apply		
	City	State ZIP Code	Does the creditor have a lien on	your property?	
			_ Mo	. 1	
	Contact		Yes. Total claim (secured ar	na unsecurea):	
	Contact phone		Value of security		<u> </u>
	Contact priorie		Unsecured claim:		<u> </u>
20	First Premier Ba	ınk	What is the nature of the claim?	Non-Purchase Money	\$1,290.00
	Creditor's name		As of the date you file, the claim		
	601 S Minnesota		Contingent		
	Number Street	at .	Unliquidated		
			— Disputed		
	Sioux Falls	SD 57104	None of the above apply		
	City	State ZIP Code	Does the creditor have a lien on	your property?	
			No		
	Contact		Yes. Total claim (secured ar	nd unsecured):	<u> </u>
	Contact phone		Value of security	-	
	Contact phone		Unsecured claim:		
Part	2: Sign Belo)W			
i di t	- Oigh Boile	····			
Un	der penalty of peri	ury, I declare that the i	nformation provided in this form is t	rue and correct.	
		•	·		
X /s/	Brent Lynn Ben	nett	X /s/ Dawn Elise Bennett		
	ent Lynn Bennett, D		Dawn Elise Bennett, Debtor	2	
	•		 ,		
Da	te <u>04/01/2016</u>		Date <u>04/01/2016</u>		
	MM / DD / YYY	Y	MM / DD / YYYY		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Brent Lynn Bennett
Dawn Elise Bennett

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

	•	e attached l	ist of creditors is true and correct to the best of his/her
know	ledge.		
Date	4/1/2016	Signature	/s/ Brent Lynn Bennett
			Brent Lynn Bennett
Date	4/1/2016	Signature	/s/ Dawn Elise Bennett

Dawn Elise Bennett

Action Recovery online 3912 Option Pass Fort Wayne, IN 46818

AFNI Collections Po Box 3097 Bloomington,IL 61702

Alvarado Veterinary Clinic 6800 E. Hwy 67 Alvarado, TX 76009

American Honda Finance 1220 Old Alpharetta Rd Alpharetta, GA 30005

AT&T Wireless 1646 W. Henderson Cleburne, TX 76031

Attorney General of Texas Collections Division Bankruptcy Section PO Box 12548 Austin, TX 78711-2548

Capital One PO Box 30287 Salt Lake, UT 84130

Cavalry Portfolio Serv 500 Summit Lake Dr Ste 500 Valhalla, NY 10595

Chase Card P.O. Box 15298 Wilmington, DE 19850 Citi-Shell PO Box 20363 Kansas City, MO 64195

Convergent Outsourcing PO Box 9004 Renton, WA 98057

Credit Coll Po Box 773 Needham, MA 02494

Credit System 1277 Country Club Ln Fort Worth TX 76112

Credit System 1277 Country Club ln Fort Worth, TX 76112

Credit Systems 1277 Country Club Lane Fort Worth, TX 76112

Credit Systems 1277 Country Club Ln Fort Worth , TX 76112

Credit Systems 1277 Country Club Ln Fort WOrth, TX 76112

Credit Systems intl in 1277 Country Club Ln Fort Worth, TX 76112 Credit Systems intl ln 1277 Country Club Ln Fort Worth, TX 76112

Dish Network 9601 S. Meridian Blvd Englewood, CO 80112

DKJ Tool Grinding Company 4358 W. Vickery Fort Worth, TX 76107

Drive Time 7300 E. Hampton Ave. Mesa, AZ 85209

DSRM National Bank PO BOX 631 Amarillo TX 79105

First Premier Bank 601 S Minnesota Ave Sioux Falls , SD 57104

Grandview Bank PO Box 449 Grandview, TX 76050

Healthcare Coll LLC PO Box 82910 Phoenix, AZ 85071

Healthcare Collections PO Box 82910 Phoenix, AZ 85071 Huguley Emergency Physicians 11801 S. Freeway Fort Worth, TX 76134

Internal Revenue Service PO Box 145566 Cincinnati, OH 45250

Internal Revenue Service 1100 Commerce St. Suite 1102 Dallas, TX 75242

Internal Revenue Service Special Procedures, Room 9A20 1100 Commerce St., 5024-DAL Dallas, TX 75242

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19114-7346

Jefferson Capital PO Box 953185 St Louis, MO 63195

Johnson County Tax Office 2 N Mill Steet Cleburne, TX 76033

Linebarger Goggan Blair Sampson LLP 2777 N. Stemmons Fwy, Suite 1000 Dallas, TX 75207

Link Debt Recovery 9176 S 300 W Sandy, UT 84070 Link Debt Recovery 9176 S.300 W Sandy, UT 84070

Lonestar Ranch and Outdoors 815 W. Industrial Blvd Cleburne, TX 76033

Lvnv Funding 11c PO BOX 10497 Greenville, SC 29603

Mackie Wolf Zientz & Mann, P.C. 14160 North Dallas Parkway Dallas, TX 75254-4319

Mark Hines, Cain & Associates 508 N. Ridgeway Cleburne, TX 76033

Medstar 2900 Alta Mere Drive Fort Worth, TX 76116

Members Trust Credit Union 2315 Mangum Road Houston, TX 77092

Midland Funding 8875 Aero Drive San Diego, CA 92123

Midland Funding 8875 Aero Dr San Diego, CA 92123 Midland Funding 8875 Areo Dr San Diego, CA 92123

North Amercn PO BOX 8005 Cleveland, TN 37320

North Amercn PO BOX 8005 Cleveland TN 37320

North America Recovery 1600 W 2200 S Ste 410 West Valley City, UT 84119

North American PO Box 8005 Cleveland, TN 37320

North American P.O. Box 8005 Cleveland, TN 37320

Ocwen Loan Servicing PO Box 24738 West Palm Beach, FL 33416

One Source Diagnostic Imaging 505 N. Ridgeway Cleburne, TX 76033

Onemain Financial PO Box 499 Hanover, MD 21076 PayPal, Inc PO Box 45950 Omaha, NE 68145

Perdue, Brandon, Fielder, Collins & Mott 500 E. Border Street, Ste 640 Arlington, TX 76010

Portfolio Recovery Ass Po Box 41067 Norfolk,VA 23541

Portfolio Recovery Associates PO Box 41067 Norfolk, VA 23541

Progressive Insurance 6300 Wilson Mills Road Mayfield Village, OH 44143

Radiology Associates North Texas 816 W. Cannon Street Fort Worth, Texas 76104

RS Clark & Associate 12990 Pandora Dr Ste 150 Dallas, TX 75238

Second Round LP 4150 Friedrich Lane Suit Austin, TX 78744

Seterus, Inc. PO Box 1077 Hartford, CT 06143-1077 SETTLEPOU 3333 Lee Parkway, 8th Floor Dallas, TX 75219

Southwest Credit System 4120 international parkway ste 1100 Carrollton, TX 75007

State Comptroller Revenue Accounting Div Bakruptcy PO Box 13528 Austin, TX 78711

Stephen C. Maxwell, Bailey & Galyen 1300 Summit Avenue, Ste.650 Fort Worth, TX 76102

Texas Alcoholic Beverage Commission License and Permits Division PO Box 13127 Austin, TX 78711-3127

Texas Medicine Resources 6451 Brentwood Stair, Ste 200 Fort Worth, Texas 705.00

Texas Workforce Commission TEC Building - Bankruptcy 101 East 15th Street Austin, TX 78714-9080

The Cowboy Bank Of Texas 100 S Main St Maypearl, TX 76064

United Revenue Corp 204 Billings St Sute 120 Arlington, TX 76010 United Revenue Corp 204 Billings St Ste 120 Arlington, TX 76010

United States Attorney 1100 Commerce St., Room 16G28 Dallas, TX 75242-1049

Windstream Communications Inc. 4001 Rodney Parham Road Little Rock, AR 72212

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Brent	Lynn	Bennett	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Dawn First Name	Elise Middle Name	Bennett Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS	
Official Form	122B			Check if this is an amended filing
		of Vour Curron	t Manthly Incom	•

Chapter 11 Statement of Your Current Monthly Income

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$0.00	\$6,828.26
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household	\$0.00	\$0.00

- expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.
- 5. Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$7,318.17	\$0.00			
Ordinary and necessary operating – expenses	- \$4,711.33	\$0.00	Сору		
Net monthly income from a business, profession, or farm	\$2,606.84	\$0.00	here -	\$2,606.84	\$0.00

Deb	otor 1	Brent First Name	Lynn Middle Name		nett Name	(Case number (if kno	own)	
		riist Name	Middle Name	Lastr	vame		Column A Debtor 1	Column B Debtor 2	
6.	Net in	ncome from rental a	nd other real pro	perty					
			Debto	or 1	Debtor 2				
		receipts (before all ctions)		\$0.00	\$0.00	-			
	Ordina	ary and necessary opnses	perating	\$0.00	\$0.00	Conv			
		nonthly income from i real property	rental or	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
7.	Intere	est, dividends, and r	oyalties				\$0.00	\$0.00	
8.	Unem	nployment compens	ation				\$0.00	\$0.00	
		ot enter the amount if it under the Social S							
	Fo	or you			\$0.	00			
	Fo	or your spouse			\$0.	00			
9.		ion or retirement inc benefit under the Sc		ude any amo	ount received that	t	\$0.00	\$0.00	
10.	amou or pay	ne from all other so nt. Do not include ar yments received as a ernational or domesti	ny benefits receive victim of a war cr	ed under the	Social Security A	ct			
	If nec	essary, list other sou	rces on a separat	e page and p	out the total below	V			
		amounts from separa	ate nages if any						
		•				т.	·	r	
11.		Ilate your total currences 2 through 10 for		ne.			\$2,606.84 	- \$6,828.26	= \$9,435.10
	Then	add the total for Colu	ımn A to the total	for Column E	3.				Total current monthly income
P	art 2:	Sign Below							monthly meonic
	By sig	gning here, under per	nalty of perjury I de	eclare that th	e information on	this statem	ent and in any atta	chments is true ar	nd correct.
	X /s/	/ Brent Lynn Benr	nett		X	/ /s/ Dawı	n Elise Bennett		
		ent Lynn Bennett, De					se Bennett, Debtor	2	
	Da	ate 04/01/2016				Date 04	/01/2016		
		MM / DD / YYYY	,				M / DD / YYYY		