

B1 (Official Form 1) (4/10)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS BROWNSVILLE DIVISION		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Reese, Jeffrey Craig		Name of Joint Debtor (Spouse) (Last, First, Middle): Reese, Debra Fay
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): aka Jeff Reese; aka Jeffrey C. Reese		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): aka Debra Reese; aka Debra F. Reese
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-7695		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-8313
Street Address of Debtor (No. and Street, City, and State): 62 Pizarro Rancho Viejo, TX		Street Address of Joint Debtor (No. and Street, City, and State): 62 Pizarro Rancho Viejo, TX
ZIP CODE 78575		ZIP CODE 78575
County of Residence or of the Principal Place of Business: Cameron		County of Residence or of the Principal Place of Business: Cameron
Mailing Address of Debtor (if different from street address): 62 Pizarro Rancho Viejo, TX		Mailing Address of Joint Debtor (if different from street address):
ZIP CODE 78575		ZIP CODE
Location of Principal Assets of Business Debtor (if different from street address above):		ZIP CODE
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition (This page must be completed and filed in every case.)		Name of Debtor(s): Jeffrey Craig Reese Debra Fay Reese	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p>X <u>/s/ EDUARDO V. RODRIGUEZ</u> 09/29/2010 EDUARDO V. RODRIGUEZ Date</p>	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.			
<input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<p>Voluntary Petition <i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Jeffrey Craig Reese Debra Fay Reese</p>
Signatures	
<p>Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>/s/ Jeffrey Craig Reese</u> Jeffrey Craig Reese</p> <p>X <u>/s/ Debra Fay Reese</u> Debra Fay Reese</p> <p>_____ Telephone Number (If not represented by attorney) 09/29/2010 Date</p>	<p>Signature of a Foreign Representative</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>
<p>Signature of Attorney*</p> <p>X <u>/s/ EDUARDO V. RODRIGUEZ</u> EDUARDO V. RODRIGUEZ Bar No. 00795621</p> <p>Malaise Law Firm 1265 N. Expressway 83 Brownsville, TX 78520</p> <p>Phone No. (956) 547-9638 Fax No. (956) 547-9630</p> <p><u>09/29/2010</u> Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p>Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>
<p>Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>_____ Date</p>	

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: **/s/ Jeffrey Craig Reese**
Jeffrey Craig Reese

Date: **09/29/2010**

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

Debtor(s)

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Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*
- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
 - Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
 - Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: **/s/ Debra Fay Reese**
Debra Fay Reese

Date: **09/29/2010**

Certificate Number: 01267-TXS-CC-012233632



01267-TXS-CC-012233632

CERTIFICATE OF COUNSELING

I CERTIFY that on September 6, 2010, at 12:00 o'clock PM CDT, Jeffrey C Reese received from Money Management International, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Texas, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: September 6, 2010 By: /s/Aidee Sanchez

Name: Aidee Sanchez

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 01267-TXS-CC-012233630



01267-TXS-CC-012233630

CERTIFICATE OF COUNSELING

I CERTIFY that on September 6, 2010, at 12:00 o'clock PM CDT, Debra F Reese received from Money Management International, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Southern District of Texas, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: September 6, 2010 By: /s/Aidee Sanchez

Name: Aidee Sanchez

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION

IN RE:
JEFFREY CRAIG AND DEBRA FAY REESE,
Debtors

§
§
§

CASE NO. 10-_____ -B-11

CHAPTER 11

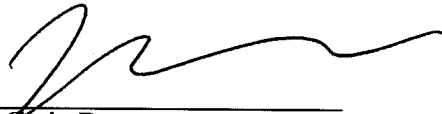
STATEMENT

STATE OF TEXAS
COUNTY OF CAMERON


§
§

BEFORE ME, the undersigned authority in and for the State of Texas, on this, theth30 day of September, 2010, personally appeared JEFFREY CRAIG AND DEBRA FAY REESE, Debtors who after being duly sworn, did depose and state the following.

1. Our names are Jeffrey Craig and Debra Fay Reese.
2. We hereby declare penalty of perjury that we do not have a personal balance sheet, statement of operations or case flow statement, nor has a balance sheet, statement operations or cash flow statement been prepared or filed on our behalf.
3. Further, Affiants Sayeth Not.



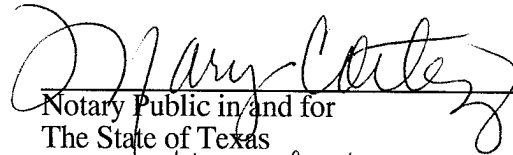
Jeffrey Craig Reese



Debra Fay Reese

SUBSCRIBED AND SWORN TO BEFORE ME on the 30th day of September, 2010, by Jeffrey Craig Reese and Debra Fay Reese.





Notary Public in and for
The State of Texas

Mary Cortez
My commission expires: 11/19/2012

Form **1040** Department of the Treasury — Internal Revenue Service **U.S. Individual Income Tax Return 2009** (99) IRS Use Only — Do not write or staple in this space.

For the year Jan 1 - Dec 31, 2009, or other tax year beginning , 2009, ending , 20

Your first name MI Last name
JEFFREY C REESE

Your social security number
 [REDACTED] **7695**

If a joint return, spouse's first name MI Last name
DEBRA F REESE

Spouse's social security number
 [REDACTED] **8313**

Home address (number and street). If you have a P.O. box, see instructions. Apartment no.
62 PIZARRO AVENUE

City, town or post office. If you have a foreign address, see instructions. State ZIP code
RANCHO VIEJO TX 78575

You must enter your social security number(s) above.

Checking a box below will not change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund? (see instructions) You Spouse

Filing Status

1 Single

2 Married filing jointly (even if only one had income)

3 Married filing separately. Enter spouse's SSN above & full name here . . .

4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here . . .

5 Qualifying widow(er) with dependent child (see instructions)

Exemptions

6a Yourself. If someone can claim you as a dependent, do not check box 6a.

b Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see instrs)
ALISSA REESE		[REDACTED] 9233	Daughter	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Boxes checked on 6a and 6b **2**

No. of children on 6c who:
 • lived with you **1**
 • did not live with you due to divorce or separation (see instrs)

Dependents on 6c not entered above

Add numbers on lines above **3**

d Total number of exemptions claimed **3**

Income

7 Wages, salaries, tips, etc. Attach Form W-2	7	257,821.
8a Taxable interest. Attach Schedule B if required	8a	
b Tax-exempt interest. Do not include on line 8a.	8b	
9a Ordinary dividends. Attach Schedule B if required	9a	
b Qualified dividends (see instrs)	9b	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	247,232.
13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here	13	
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions	15a	
b Taxable amount (see instrs)	15b	
16a Pensions and annuities	16a	
b Taxable amount (see instrs)	16b	44,737.
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation in excess of \$2,400 per recipient (see instructions)	19	
20a Social security benefits	20a	
b Taxable amount (see instrs)	20b	
21 Other income	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	549,790.

Adjusted Gross Income

23 Educator expenses (see instructions)	23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25 Health savings account deduction. Attach Form 8889	25	
26 Moving expenses. Attach Form 3903	26	
27 One-half of self-employment tax. Attach Schedule SE	27	3,311.
28 Self-employed SEP, SIMPLE, and qualified plans	28	
29 Self-employed health insurance deduction (see instructions)	29	
30 Penalty on early withdrawal of savings	30	
31a Alimony paid b Recipient's SSN	31a	53,040.
32 IRA deduction (see instructions)	32	
33 Student loan interest deduction (see instructions)	33	
34 Tuition and fees deduction. Attach Form 8917	34	
35 Domestic production activities deduction. Attach Form 8903	35	
36 Add lines 23 - 31a and 32 - 35	36	56,351.
37 Subtract line 36 from line 22. This is your adjusted gross income ▶	37	493,439.

Form 1040 (2009)

JEFFREY C & DEBRA F REESE

179-52-7695 Page 2

Tax and Credits

Standard Deduction for -

• People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$5,700

Married filing jointly or Qualifying widow(er), \$11,400

Head of household, \$8,350

38	Amount from line 37 (adjusted gross income)	38	493,439.
39a	Check if: <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input type="checkbox"/> 39b		
40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40a	43,314.
41	Subtract line 40a from line 38	41	450,125.
42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see instructions	42	7,299.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	442,826.
44	Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	125,351.
45	Alternative minimum tax (see instructions). Attach Form 6251	45	2,732.
46	Add lines 44 and 45	46	128,083.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 29	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see instructions)	51	
52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	52	
53	Other crs from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	
54	Add lines 47 through 53. These are your total credits	54	
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	128,083.
56	Self-employment tax. Attach Schedule SE	56	6,621.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	4,474.
59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input type="checkbox"/> Household employment taxes. Attach Schedule H	59	
60	Add lines 55-59. This is your total tax	60	139,178.

Other Taxes

Payments

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099	61	67,354.
62	2009 estimated tax payments and amount applied from 2008 return	62	
63	Making work pay and government retiree credit. Attach Schedule M	63	0.
64a	Earned income credit (EIC) <input type="checkbox"/> No <input type="checkbox"/> Yes	64a	
65	Additional child tax credit. Attach Form 8812	65	
66	Refundable education credit from Form 8863, line 16	66	
67	First-time homebuyer credit. Attach Form 5405	67	
68	Amount paid with request for extension to file (see instructions)	68	
69	Excess social security and tier 1 RRTA tax withheld (see instructions)	69	0.
70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70	
71	Add lns 61-63, 64a, & 65-70. These are your total pmnts	71	67,354.

Refund

Direct deposit? See instructions and fill in 73b, 73c, and 73d or Form 8888.

72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	
73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	73a	
	b Routing number 114908289 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 1507818		
74	Amount of line 72 you want applied to your 2010 estimated tax	74	

Amount You Owe

75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see instructions	75	73,364.
76	Estimated tax penalty (see instructions)	76	1,540.

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete the following. No

Designee's name **ERWIN M. WALDMAN, EA.** Phone no. **8282** Personal identification number (PIN) **8282**

Sign Here

Joint return? See instructions. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
<i>Erwin Waldman EA</i>		SURGEON	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		HOMEMAKER	

Paid Preparer's Use Only

Preparer's signature *Erwin Waldman EA* Date **04/07/2010** Check if self-employed Preparer's SSN or PTIN **8282**

Firm's name (or yours if self-employed) **ERWIN M. WALDMAN, EA** address, and ZIP code **14500 LINCOLN BLVD. OAK PARK MI 48237-4102** EIN **8282** Phone no. **8282**

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

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
Missouri Property Property located at 14027 Winchester Ct., Grandview, MO 64030, further described as: Assessor's Parcel Number: 67-610-06-24-00-0-00-000; Single Family Residence, Townhouse, Jackson County, Missouri.	Fee Simple	C	\$122,000.00	\$107,252.00

Total: \$122,000.00

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on hand	C	\$100.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		Checking Acct # xx 7818 at First Community Bank styled Jeff Reese and Debra Reese	C	\$2,447.12
		Checking Acct # xx 0654 at Commerce Bank, styled Jeffrey C. Reese, M.D., or Debra F. Reese	C	(\$1,000.00)
3. Security deposits with public utilities, telephone companies, landlords, and others.		Security Deposit held by Landlord - D. Robertson	C	\$2,000.00
4. Household goods and furnishings, including audio, video and computer equipment.		Sofa	C	\$100.00
		Love Seat	C	\$200.00
		Side Chair	C	\$200.00
		3 Coffee Tables	C	\$20.00
		2 Bookcases	C	\$50.00
		2 Television Sets	C	\$150.00
		4 Lamps	C	\$200.00
		2 Computers	C	\$100.00
		2 VCR / DVD Players	C	\$50.00
		Refrigerator	C	\$50.00
		Microwave Oven	C	\$25.00
		Small Kitchen Appliances	C	\$10.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 1*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		Pots and Pans	C	\$25.00
		Dishes and Glassware	C	\$25.00
		Flatware	C	\$10.00
		Table and Chairs	C	\$100.00
		China Cabinet	C	\$50.00
		Bed	C	\$50.00
		Dresser	C	\$100.00
		2 Chests of Drawers	C	\$100.00
		2 Night Stands	C	\$25.00
		Lamps	C	\$5.00
		Pictures	C	\$50.00
		Bed	C	\$25.00
		Night Stands	C	\$20.00
		Washer	C	\$300.00
		Dryer	C	\$300.00
		Hand Tools	C	\$100.00
		Nikon Camera	C	\$700.00
		Stained Glass Equipment	C	\$800.00
		Printer	C	\$10.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing	C	\$425.00
7. Furs and jewelry.		Him: Watch	C	\$100.00
		Him: Wedding Ring	C	\$300.00
		Her: Watch	C	\$100.00
		Her: Wedding Ring	C	\$9,000.00
		Her: Necklaces	C	\$50.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Policy # XX-451L Term Life Insurance THE CINCINNATI INSURANCE COMPANIES Insured: Jeffrey C. Reese -0- Cash Value	C	\$0.00
		Policy # XX-508L Term Life Insurance THE CINCINNATI INSURANCE COMPANIES Insured: Jeffrey C. Reese -0- Cash Value	C	\$0.00
		Policy # XX-507L Term Life Insurance THE CINCINNATI INSURANCE COMPANIES	C	\$0.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
<p>10. Annuities. Itemize and name each issuer.</p> <p>11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)</p> <p>12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.</p> <p>13. Stock and interests in incorporated and unincorporated businesses. Itemize.</p> <p>14. Interests in partnerships or joint ventures. Itemize.</p> <p>15. Government and corporate bonds and other negotiable and non-negotiable instruments.</p> <p>16. Accounts receivable.</p> <p>17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>	<p>Insured: Debra F. Reese -0- Cash Value</p> <p>100% interest in Personal LLC (formed, but never had any activity -0- value)</p>	<p>C</p>	<p>\$0.00</p>

B6B (Official Form 6B) (12/07) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 4

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 5

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Lincoln Mark LT Automobile, driven by Co-Debtor	C	\$14,000.00
		2003 Mitsubishi Galant, Driven by Debtor	C	\$500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		HORSE - Natcho, Age 8	C	\$35,000.00
		HORSE -- Cowboy, Age 8	C	\$10,000.00
		8 finches	C	\$200.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Total > **\$77,172.12**

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

5 continuation sheets attached

B6C (Official Form 6C) (4/10)

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

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

Check if debtor claims a homestead exemption that exceeds
 \$146,450.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Sofa	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
Love Seat	Kan Stat. Ann. § 60-2304(a)	\$200.00	\$200.00
Side Chair	Kan Stat. Ann. § 60-2304(a)	\$200.00	\$200.00
3 Coffee Tables	Kan Stat. Ann. § 60-2304(a)	\$20.00	\$20.00
2 Bookcases	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
2 Television Sets	Kan Stat. Ann. § 60-2304(a)	\$150.00	\$150.00
4 Lamps	Kan Stat. Ann. § 60-2304(a)	\$200.00	\$200.00
2 Computers	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
2 VCR / DVD Players	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
Refrigerator	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
Microwave Oven	Kan Stat. Ann. § 60-2304(a)	\$25.00	\$25.00
Small Kitchen Appliances	Kan Stat. Ann. § 60-2304(a)	\$10.00	\$10.00
Pots and Pans	Kan Stat. Ann. § 60-2304(a)	\$25.00	\$25.00
Dishes and Glassware	Kan Stat. Ann. § 60-2304(a)	\$25.00	\$25.00
Flatware	Kan Stat. Ann. § 60-2304(a)	\$10.00	\$10.00
		\$1,215.00	\$1,215.00

* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6C (Official Form 6C) (4/10) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT***Continuation Sheet No. 1*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Table and Chairs	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
China Cabinet	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
Bed	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
Dresser	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
2 Chests of Drawers	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
2 Night Stands	Kan Stat. Ann. § 60-2304(a)	\$25.00	\$25.00
Lamps	Kan Stat. Ann. § 60-2304(a)	\$5.00	\$5.00
Pictures	Kan Stat. Ann. § 60-2304(a)	\$50.00	\$50.00
Bed	Kan Stat. Ann. § 60-2304(a)	\$25.00	\$25.00
Night Stands	Kan Stat. Ann. § 60-2304(a)	\$20.00	\$20.00
Washer	Kan Stat. Ann. § 60-2304(a)	\$300.00	\$300.00
Dryer	Kan Stat. Ann. § 60-2304(a)	\$300.00	\$300.00
Hand Tools	Kan Stat. Ann. § 60-2304(a)	\$100.00	\$100.00
Nikon Camera	Kan Stat. Ann. § 60-2304(a)	\$700.00	\$700.00
Stained Glass Equipment	Kan Stat. Ann. § 60-2304(a)	\$800.00	\$800.00
Printer	Kan Stat. Ann. § 60-2304(a)	\$10.00	\$10.00
Clothing	Kan Stat. Ann. § 60-2304(a)	\$425.00	\$425.00
Him: Watch	Kan Stat. Ann. § 60-2304(b)	\$100.00	\$100.00
Him: Wedding Ring	Kan Stat. Ann. § 60-2304(b)	\$300.00	\$300.00
		\$4,775.00	\$4,775.00

B6C (Official Form 6C) (4/10) -- Cont.

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT***Continuation Sheet No. 2*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Her: Watch	Kan Stat. Ann. § 60-2304(b)	\$100.00	\$100.00
Her: Wedding Ring	Kan Stat. Ann. § 60-2304(b)	\$1,500.00	\$9,000.00
Her: Necklaces	Kan Stat. Ann. § 60-2304(b)	\$0.00	\$50.00
		\$6,375.00	\$13,925.00

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

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

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

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxx7904 Bac Home Loans Service 450 American St Simi Valley, CA 93065	C	DATE INCURRED: 06/2007 NATURE OF LIEN: Conventional Real Estate Mortgage COLLATERAL: Missouri Property REMARKS: 2 MONTHS ARREARS AT TIME OF FILING \$2,538.59. Notice of Intent to Accelerate issued 8-16-2010; deadline 9-15-2010 DEBTORS TO SURRENDER				\$107,252.00	
		VALUE: \$122,000.00					
ACCT #: xxxx2030 Ford Motor Credit Corporation National Bankruptcy Center PO Box 6275 Dearborn, MI 48121	C	DATE INCURRED: 06/2006 NATURE OF LIEN: Purchase Money Security COLLATERAL: 2006 Lincoln Mark LT REMARKS: Current and pay direct. 14 months left to pay				\$13,255.00	
		VALUE: \$14,000.00					
ACCT #: xxx-xx-7695 Internal Revenue Service Special Procedures 300 East 8th St., STOP 5026AUS Austin, TX 78701	C	DATE INCURRED: 07; 08; 09 NATURE OF LIEN: Federal Tax Lien - 07 & 08 1040 taxes COLLATERAL: Personal Property REMARKS:				\$207,666.37	
		VALUE: \$207,666.37					
Subtotal (Total of this Page) >						\$328,173.37	\$0.00
Total (Use only on last page) >						\$328,173.37	\$0.00

 No continuation sheets attached

(Report also on Summary of Schedules.)
(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/10)

In re **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS** Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) **Domestic Support Obligations**

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

 Extensions of credit in an involuntary case

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

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

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

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

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

 Commitments to Maintain the Capital of an Insured Depository Institution

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

 Claims for Death or Personal Injury While Debtor Was Intoxicated

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

 Administrative allowances under 11 U.S.C. Sec. 330

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

** Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*2 continuation sheets attached

B6E (Official Form 6E) (04/10) - Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: xxx-xx-7695 Missouri Department of Revenue Taxation Division P.O. Box 385 Jefferson City, MO 65105-0385	C	DATE INCURRED: 2009 CONSIDERATION: Missouri State Individual IncomeTa: REMARKS:				\$12,589.84	\$12,589.84	\$0.00
Sheet no. <u>1</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims						\$12,589.84	\$12,589.84	\$0.00
Total > (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)								
Totals > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								

B6E (Official Form 6E) (04/10) - Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY Domestic Support Obligations

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
ACCT #: xxxx xx xx3240 State of Kansas Office of the District Court Trustee 100 North Kansas, Suite 406 P.O. Box 760 Olathe, KS 66051-0760	C	DATE INCURRED: 2010 CONSIDERATION: UnPAID Child Support REMARKS:				\$3,760.00	\$3,760.00	\$0.00	
Sheet no. <u>2</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims						Subtotals (Totals of this page) >	\$3,760.00	\$3,760.00	\$0.00
						Total >	\$16,349.84		
						Totals >		\$16,349.84	\$0.00

(Use only on last page of the completed Schedule E.
Report also on the Summary of Schedules.)

(Use only on last page of the completed Schedule E.
If applicable, report also on the Statistical Summary
of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07)
 In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
 (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxxxx0002 Aes/student Loan Xpres Po Box 2461 Harrisburg, PA 17105	C	DATE INCURRED: 08/29/2006 CONSIDERATION: Educational REMARKS:				\$38,211.00
ACCT #: xxxxxxxxxxxxxx0003 Aes/student Loan Xpres P.O. Box 2461 Harrisburg, PA 17105	C	DATE INCURRED: 08/31/2007 CONSIDERATION: Educational REMARKS:				\$36,766.00
ACCT #: xxxxxxxxxxxxxx0001 Aes/student Loan Xpres Po Box 2461 Harrisburg, PA 17105	C	DATE INCURRED: 06/30/2006 CONSIDERATION: Educational REMARKS:				\$7,904.00
ACCT #: xxxxxxxxxxxx1518 Bank Of America Std Lo 21680 Ridgetop Cir Sterling, VA 20166	C	DATE INCURRED: 12/2006 CONSIDERATION: Educational REMARKS:				\$6,928.00
ACCT #: xxxxx1284 Children's Mercy Hospitals & Clinics Patient Accounts Department P.O. Box 804435 Kansas City, MO 94180-4435	C	DATE INCURRED: 4/10 CONSIDERATION: Services Rendered REMARKS:				\$506.56
ACCT #: xxx-xxxx-xxxxxxx-9003 Commerce Bank, N.A. Kansas City Banking Center 1000 Walnut Kansas City, MO 64199	C	DATE INCURRED: 5/26/10 CONSIDERATION: Unsecured Promissory Note REMARKS:				\$99,723.29
Subtotal >						\$190,038.85
Total >						

3 continuation sheets attached

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the
 Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx-xxxx-xxxx-2649 Commerce Bk Credit Card - Line of Credit P.O. Box 80600 Kansas City, MO 64180-6000	C	DATE INCURRED: 12/2007 CONSIDERATION: Credit Card REMARKS:				\$24,211.91
Representing: Commerce Bk		Commerce Bank, N.A. 3930 S. 147th St. Ste. 200 Omaha, NE 68147-9972				Notice Only
ACCT #: xxxxxxxx7076 Discover Fin Attention: Bankruptcy Department PO Box 3025 New Albany, OH 43054	C	DATE INCURRED: 01/2004 CONSIDERATION: Credit Card REMARKS:				\$18,979.00
Representing: Discover Fin		Capital Management Services, LP 726 Exchange Street, Suite 700 Buffalo, NY 14210				Notice Only
ACCT #: xxxx-xx-4449 Kansas City Power and Light P.O. Box 219330 Kansas City, MO 64121-9330	C	DATE INCURRED: 1-22-2010 CONSIDERATION: Services Rendered REMARKS:				\$98.95
Representing: Kansas City Power and Light		Harris & Harris, Ltd. 600 W. Jackson Chicago, IL 60654				Notice Only
Subtotal >						\$43,289.86
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 1 of 3 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: x1311 Michael Tanner, DDS 10400 W. 104rd, Suite 21 Overland Park, KS 66214-2664	C	DATE INCURRED: 4-2010 CONSIDERATION: Services Rendered REMARKS:				\$156.31
ACCT #: xxxxxxxxxxx1518 NCO Financial Systems, Inc. P.O. Box 17295 Baltimore, MD 21297	C	DATE INCURRED: 2009 CONSIDERATION: For: Educap-Bank of America REMARKS:				\$277.33
ACCT #: xxxxxxx0644 Sears/cbsd 701 East 60th St N Sioux Falls, SD 57117	C	DATE INCURRED: 06/2003 CONSIDERATION: Charge Account REMARKS:				\$5,125.00
Representing: Sears/cbsd		Alliance One Receivables Management, Inc. P.O. Box 3107 Southeastern, PA 19398-3107				Notice Only
Representing: Sears/cbsd		Client Services, Inc. 3451 Harry Truman Blvd. St. Charles, MO 63301-4047				Notice Only
ACCT #: xxxxx4329 Sprint P.O. Box 66075 Dallas, TX 75266-0075	C	DATE INCURRED: 7-2010 CONSIDERATION: Services Rendered REMARKS:				\$1,045.18
Subtotal >						\$6,603.82
Total >						
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

Sheet no. 2 of 3 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCT #: xxxxxx6952 Us Dept Of Education Attn: Borrowers Service Dept PO Box 5609 Greenville, TX 75403	C	DATE INCURRED: 09/2009 CONSIDERATION: Educational REMARKS:				\$35,550.00	
ACCT #: xxxxxx6951 Us Dept Of Education Attn: Borrowers Service Dept PO Box 5609 Greenville, TX 75403	C	DATE INCURRED: 08/2008 CONSIDERATION: Educational REMARKS:				\$34,945.00	
ACCT #: xxx6339 Vvac Loan Services Champlain Mill, 1 Main S Winooski, VT 05404	C	DATE INCURRED: 11/2006 CONSIDERATION: Educational REMARKS: Student loan which Debtor co-signed for K. West, step-daughter				\$2,982.00	
ACCT #: xxx7939 Vvac Loan Services Champlain Mill, 1 Main S Winooski, VT 05404	C	DATE INCURRED: 06/2007 CONSIDERATION: Educational REMARKS: Student loan which Debtor co-signed for K. West, step-daughter				\$1,825.00	
Sheet no. <u>3</u> of <u>3</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >	\$75,302.00
						Total >	\$315,234.53
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							

B6G (Official Form 6G) (12/07)

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

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

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

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<p>Melissa Avalos c/o Dale Robertson 2168 E. Jackson St. Brownsville, TX 78520</p> <p>Paul and Lisa Pickard 19154 Mohawk Dr. Stilwell, KS 66085</p>	<p>Residential Lease 62 Pizarro Rancho Viejo, TX 78575 Debtor Curent and Will Assume Contract to be ASSUMED</p> <p>One year lease, beginning Sept 2010, on horse - Natcho Contract to be ASSUMED</p>

B6H (Official Form 6H) (12/07)

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
 (if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	Dependents of Debtor and Spouse	
	Married	Relationship(s): Daughter Age(s): 17 Son 27
Employment:	Debtor	Spouse
Occupation	Surgeon	Respiratory Therapist
Name of Employer	Valley Baptist Medical Center	PRN at Valley Baptist South Texas Rehab
How Long Employed	Started Feb 17, 2010	Started Feb 20, 2010
Address of Employer	2101 Pease Street P.O. Box 2588 Harlingen, TX 78550	2101 Pease Street P.O. Box 2588 Harlingen, TX 78550

	DEBTOR	SPOUSE
INCOME: (Estimate of average or projected monthly income at time case filed)		
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$37,328.62	\$2,286.18
2. Estimate monthly overtime	\$0.00	\$0.00
3. SUBTOTAL	\$37,328.62	\$2,286.18
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$7,123.86	\$303.15
b. Social Security Tax	\$913.32	\$141.74
c. Medicare	\$531.95	\$33.15
d. Insurance	\$162.63	\$0.00
e. Union dues	\$0.00	\$0.00
f. Retirement	\$0.00	\$0.00
g. Other (Specify) _____	\$0.00	\$0.00
h. Other (Specify) _____	\$0.00	\$0.00
i. Other (Specify) _____	\$0.00	\$0.00
j. Other (Specify) _____	\$0.00	\$0.00
k. Other (Specify) _____	\$0.00	\$0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$8,731.76	\$478.04
6. TOTAL NET MONTHLY TAKE HOME PAY	\$28,596.86	\$1,808.14
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$0.00	\$0.00
8. Income from real property	\$0.00	\$0.00
9. Interest and dividends	\$0.00	\$0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	\$0.00
11. Social security or government assistance (Specify): _____	\$0.00	\$0.00
12. Pension or retirement income	\$0.00	\$0.00
13. Other monthly income (Specify):		
a. _____ / South Texas Rehab - started 5-25-2010	\$0.00	\$1,344.24
b. _____	\$0.00	\$0.00
c. _____	\$0.00	\$0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$0.00	\$1,344.24
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$28,596.86	\$3,152.38
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$31,749.24	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None.

B6J (Official Form 6J) (12/07)

IN RE: **Jeffrey Craig Reese**
Debra Fay ReeseCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

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

1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No b. Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	\$1,200.00
2. Utilities: a. Electricity and heating fuel b. Water and sewer c. Telephone d. Other:	\$600.00 \$75.00 \$460.00
3. Home maintenance (repairs and upkeep)	\$150.00
4. Food	\$900.00
5. Clothing	\$100.00
6. Laundry and dry cleaning	\$60.00
7. Medical and dental expenses	\$1,501.00
8. Transportation (not including car payments)	
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$500.00
10. Charitable contributions	\$50.00
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other: Insurance for child per divorc	\$628.00 \$239.63 \$249.10
12. Taxes (not deducted from wages or included in home mortgage payments) Specify:	
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto: Ford Motor Credit-last payment: Dec 2011 b. Other: c. Other: d. Other:	\$953.00
14. Alimony, maintenance, and support paid to others: Alimony per divorce decree	\$4,420.00
15. Payments for support of add'l dependents not living at your home: Child suport/last mo - Mar 11	\$500.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	
17.a. Other: See attached personal expenses 17.b. Other:	\$5,416.67
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$18,002.40
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: None.	
20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 15 of Schedule I b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	\$31,749.24 \$18,002.40 \$13,746.84

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

IN RE: **Jeffrey Craig Reese**
Debra Fay Reese

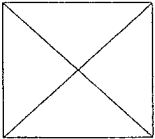
CASE NO

CHAPTER 11

EXHIBIT TO SCHEDULE J

Itemized Personal Expenses

Expense	Amount
Maid Services	\$240.00
Vaderbilt College Tuition - daughter C Reese	\$2,916.67
C. Reese - monthly living expenses - daughter in college	\$350.00
Health Club	\$30.00
Rent for Son in College	\$780.00
Utilities - son in college	\$150.00
Food & living expenses- son in college	\$500.00
Car insurance - son in college	\$150.00
Health Insurance - son in college	\$120.00
Cable - son in college	\$180.00
Total >	\$5,416.67



Harlingen Physician Network
 2101 Pease Street
 PO Box 2588
 Harlingen, TX 78550

Date
 09/24/2010

Advice No.
XXXXXXXXXX

To The
 Account(s) Of

JEFFREY REESE
 62 Pizarro Ave
 Rancho Viejo, TX 78575

 HPNCO 3433356

DIRECT DEPOSIT DISTRIBUTION	
Account Type	Deposit Amount
Checking	28,799.17
Total:	28,799.17

NON-NEGOTIABLE

Harlingen Physician Network
 2101 Pease Street, PO Box 2588
 Harlingen, TX 78550

Pay Group:	MTH-Hrl Physicians Network Monthly	Business Unit:	HPNCO
Pay Begin Date:	09/01/2010	Advice #:	0485092
Pay End Date:	09/30/2010	Advice Date:	09/24/2010

Jeffrey Reese 62 Pizarro Ave Rancho Viejo, TX 78575	Employee ID: 106991 Department: 3433356-Surgery - Brownsville Location: VB Hospital Holdings Job Title: Physician Hourly Pay Rate: \$180.29	TAX DATA: Federal Marital Status: Married Allowances: 99 Addl. Pct.: Addl. Amt.: 6,400.00
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HOURS AND EARNINGS						TAXES		
Description	Rate	Current		YTD		Description	Current	YTD
		Hours	Earnings	Hours	Earnings			
Regular			31,250.00	1,136.00	233,173.08	Fed Withholding	7,156.68	51,647.95
Emergency Room Coverage			2,300.00		12,650.00	Fed MED/EE	529.02	3,856.66
Additional Pay			3,323.88		18,424.05	Fed OASDI/EE	0.00	6,621.60
Moving Non Taxable			0.00		3,476.83			
MEDICAL ADDITIONAL PAY			0.00		2,908.54			
Total:			36,873.88	1,136.00	270,632.50	Total:	7,685.70	62,126.21

*7.25 = 7123.86
 = 531.95
 = 913.32*

7.25 = 37,328.62

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
Valley Health Plan	159.02	949.10				Valley Health Plan	636.02	5,139.02
Dental Plan 2	53.18	53.18				Basic Life	15.00	105.00
Vision Plan	10.14	10.14				Basic Life*	46.00	322.00
Healthcare FSA	166.67	166.67				Basic AD&D	3.75	26.25
						Long Term Disability	18.00	126.00
Total:	389.01	1,179.09	Total:	0.00	0.00	Total:	7,685.70	62,126.21

7.25 = 162.63

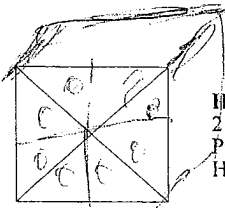
TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: 36,873.88	36,530.87	7,685.70	389.01	28,799.17
YTD: 270,632.50	266,298.58	62,126.21	1,179.09	207,327.20

<table border="1"> <thead> <tr> <th>PTO HOURS</th> <th>YTD</th> <th>PTR HOURS</th> <th>YTD</th> <th>EIB HOURS</th> <th>YTD</th> </tr> </thead> <tbody> <tr> <td>Start Balance:</td> <td>0.0</td> <td>Start Balance:</td> <td>0.0</td> <td>Start Balance:</td> <td>0.0</td> </tr> <tr> <td>+ Earned:</td> <td>21.0</td> <td>+ Earned:</td> <td></td> <td>+ Earned:</td> <td>7.0</td> </tr> <tr> <td>- Taken:</td> <td></td> <td>- Taken:</td> <td></td> <td>- Taken:</td> <td></td> </tr> <tr> <td>- Sold:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>+ Adjustments:</td> <td></td> <td>+/- Adjustments:</td> <td></td> <td>+/- Adjustments:</td> <td></td> </tr> <tr> <td>End Balance:</td> <td>21.0</td> <td>End Balance:</td> <td>0.0</td> <td>End Balance:</td> <td>7.0</td> </tr> </tbody> </table>	PTO HOURS	YTD	PTR HOURS	YTD	EIB HOURS	YTD	Start Balance:	0.0	Start Balance:	0.0	Start Balance:	0.0	+ Earned:	21.0	+ Earned:		+ Earned:	7.0	- Taken:		- Taken:		- Taken:		- Sold:						+ Adjustments:		+/- Adjustments:		+/- Adjustments:		End Balance:	21.0	End Balance:	0.0	End Balance:	7.0	<table border="1"> <thead> <tr> <th colspan="2">NET PAY DISTRIBUTION</th> </tr> </thead> <tbody> <tr> <td>Advice #0485092</td> <td>28,799.17</td> </tr> <tr> <td>Total:</td> <td>28,799.17</td> </tr> </tbody> </table>	NET PAY DISTRIBUTION		Advice #0485092	28,799.17	Total:	28,799.17
PTO HOURS	YTD	PTR HOURS	YTD	EIB HOURS	YTD																																												
Start Balance:	0.0	Start Balance:	0.0	Start Balance:	0.0																																												
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+ Adjustments:		+/- Adjustments:		+/- Adjustments:																																													
End Balance:	21.0	End Balance:	0.0	End Balance:	7.0																																												
NET PAY DISTRIBUTION																																																	
Advice #0485092	28,799.17																																																
Total:	28,799.17																																																

MESSAGE:

YTD = 7.25 months - started 2-17-2010

*** 60-DAY PS ***



Harlingen Physician Network
 2101 Pease Street
 PO Box 2588
 Harlingen, TX 78550

Date
 08/25/2010

Advice No. **[REDACTED]**

DIRECT DEPOSIT DISTRIBUTION	
Account Type	Deposit Amount
Checking	27,580.59
Total:	27,580.59

To The
 Account(s) Of

JEFFREY REESE
 62 Pizarro Ave
 Rancho Viejo, TX 78575

 HPNCO 3433356

NON-NEGOTIABLE

Harlingen Physician Network
 2101 Pease Street, PO Box 2588
 Harlingen, TX 78550

Pay Group:	MTH-Hrl Physicians Network Monthly	Business Unit:	HPNCO
Pay Begin Date:	08/01/2010	Advice #:	0471597
Pay End Date:	08/31/2010	Advice Date:	08/25/2010

Jeffrey Reese 62 Pizarro Ave Rancho Viejo, TX 78575	Employee ID: 106991 Department: 3433356-Surgery - Brownsville Location: VB Hospital Holdings Job Title: Physician Hourly Pay Rate: \$180.29	TAX DATA: Federal Marital Status: Married Allowances: 99 Addl. Pct.: Addl. Aml.: 6,400.00
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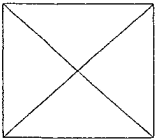
HOURS AND EARNINGS						TAXES		
Description	Rate	Current		YTD		Description	Current	YTD
		Hours	Earnings	Hours	Earnings			
Regular			31,250.00	1,136.00	233,173.08	Fed Withholding	6,925.41	50,891.27
Additional Pay			3,895.38		15,100.17	Fed MED/EE	507.70	3,778.85
Moving Non Taxable			0.00		3,476.83	Fed OASDI/EE	0.00	6,621.60
MEDICAL ADDITIONAL PAY			0.00		2,908.54			
Emergency Room Coverage			0.00		10,350.00			
Total:			35,145.38	1,136.00	265,008.62	Total:	7,433.11	61,291.72

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
Valley Health Plan 500B	131.68	921.76				Valley Health Plan 500B	750.50	5,253.50
						Basic Life	15.00	105.00
						Basic Life*	46.00	322.00
						Basic AD&D	3.75	26.25
						Long Term Disability	18.00	126.00
Total:	131.68	921.76	Total:	0.00	0.00	* Taxable		

TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: 35,145.38	35,059.70	7,433.11	131.68	27,580.59
YTD: 265,008.62	260,932.03	61,291.72	921.76	202,795.14

PTO HOURS	YTD	PTR HOURS	YTD	EIB HOURS	YTD	NET PAY DISTRIBUTION	
Start Balance:	0.0	Start Balance:	0.0	Start Balance:	0.0	Advice #0471597	27,580.59
+ Earned:	33.2	+ Earned:		+ Earned:	11.1	Total:	27,580.59
- Taken:		- Taken:		- Taken:			
- Sold:							
+ Adjustments:		+/- Adjustments:		+/- Adjustments:			
End Balance:	33.2	End Balance:	0.0	End Balance:	11.1		

MESSAGE:



Valley Baptist Hosp Holdings
 2101 PEASE STREET
 PO BOX 2588
 HARLINGEN, TX 78550

Date
 09/09/2010

Advice No.
XXXXXXXXXX

DIRECT-DEPOSIT DISTRIBUTION	
Account Type	Deposit Amount
Checking	397.98
Total:	397.98

To The
 Account(s) Of

DEBRA F REESE
 62 Pizarro Ave
 Rancho Viejo, TX 78575
 BRNVB 3601736

NON-NEGOTIABLE

Valley Baptist Hosp Holdings
 2101 PEASE STREET, PO BOX 2588
 HARLINGEN, TX 78550

Pay Group:	BWK-VBHH BiWeekly Payroll	Business Unit:	BRNVB
Pay Begin Date:	08/19/2010	Advice #:	0481976
Pay End Date:	09/01/2010	Advice Date:	09/09/2010

Debra F Reese 62 Pizarro Ave Rancho Viejo, TX 78575	Employee ID: 107123 Department: 3601736-Respiratory Therapy Location: VB Hospital Holdings Job Title: Resp/RRT Hourly Pay Rate: \$31.50	TAX DATA: Federal Marital Status: Single Allowances: 0 Addl. Pct.: Addl. Amt.:
---	---	--

HOURS AND EARNINGS						TAXES		
Description	Rate	Current		YTD		Description	Current	YTD
		Hours	Earnings	Hours	Earnings			
Regular	31.50	12.73	401.00	330.81	10,420.56	Fed Withholding	28.37	1,894.71
Education	31.50	0.82	25.83	64.39	2,028.29	Fed MED/EE	6.93	207.19
Brownsville Shift 22	3.47	5.35	18.54	146.73	508.42	Fed OASDI/EE	29.64	885.90
Brownsville Shift 23	4.41	7.38	32.55	221.86	978.41			
Overtime			0.00	7.47	352.96			
Total:		26.28	477.92	771.26	14,288.64	Total:	64.94	2,987.80

=6.25
303.15
33.15
141.74

=6.25 = 2286.18

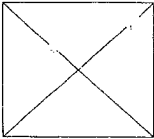
=6.25

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Employee Accounts Receivables	15.00	75.00			
Total:	0.00	0.00	Total:	15.00	75.00	Total:		

TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current: 477.92	477.92	64.94	15.00	397.98
YTD: 14,288.64	14,288.64	2,987.80	75.00	11,225.84

PTO HOURS	YTD	PTR HOURS	YTD	EIB HOURS	YTD	NET PAY DISTRIBUTION	
Start Balance:	0.0	Start Balance:	0.0	Start Balance:	0.0	Advice #0481976	397.98
+ Earned:		+ Earned:		+ Earned:		Total:	397.98
- Taken:		- Taken:		- Taken:			
- Sold:							
+ Adjustments:		+/- Adjustments:		+/- Adjustments:			
End Balance:	0.0	End Balance:	0.0	End Balance:	0.0		

MESSAGE: *started Feb. 20, 2010* (6.25 mos)



Valley Baptist Hosp Holdings
 2101 PEASE STREET
 PO BOX 2588
 HARLINGEN, TX 78550

Date
 08/26/2010

Advice No.
 0473949

To The
 Account(s) Of

DEBRA F REESE
 62 Pizarro Ave
 Rancho Viejo, TX 78575

 BRNVB 3601736

DIRECT DEPOSIT DISTRIBUTION	
Account Type	Deposit Amount
Checking	688.61
Total:	688.61

NON-NEGOTIABLE

Valley Baptist Hosp Holdings
 2101 PEASE STREET, PO BOX 2588
 HARLINGEN, TX 78550

Pay Group:	BWK-VBHH BiWeekly Payroll	Business Unit:	BRNVB
Pay Begin Date:	08/05/2010	Advice #:	0473949
Pay End Date:	08/18/2010	Advice Date:	08/26/2010

Debra F Reese 62 Pizarro Ave Rancho Viejo, TX 78575	Employee ID:	107123	TAX DATA:	Federal
	Department:	3601736-Respiratory Therapy	Marital Status:	Single
	Location:	VB Hospital Holdings	Allowances:	0
	Job Title:	Resp/RRT	Addl. Pct.:	
	Hourly Pay Rate:	\$31.50	Addl. Amt.:	

HOURS AND EARNINGS						TAXES		
Description	Rate	Current		YTD		Description	Current	YTD
		Hours	Earnings	Hours	Earnings			
Regular	31.50	24.00	756.00	318.08	10,019.56	Fed Withholding	84.73	1,866.34
Brownsville Shift 22	3.47	8.68	30.08	141.38	489.88	Fed MED/EE	12.38	200.26
Brownsville Shift 23	4.41	15.32	67.56	214.48	945.86	Fed OASDI/EE	52.92	856.26
Overtime			0.00	7.47	352.96			
Education			0.00	63.57	2,002.46			
Total:		48.00	853.64	744.98	13,810.72	Total:	150.03	2,922.86

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Employee Accounts Receivables	15.00	60.00			
Total:	0.00	0.00	Total:	15.00	60.00	* Taxable		
TOTAL GROSS	853.64	13,810.72	FED TAXABLE GROSS	853.64	13,810.72	TOTAL TAXES	150.03	2,922.86
TOTAL DEDUCTIONS	15.00	60.00	NET PAY	688.61	10,827.86			

PTO HOURS	YTD	PTR HOURS	YTD	EIB HOURS	YTD	NET PAY DISTRIBUTION	
Start Balance:	0.0	Start Balance:	0.0	Start Balance:	0.0	Advice #0473949	688.61
+ Earned:		+ Earned:		+ Earned:		Total:	688.61
- Taken:		- Taken:		- Taken:			
- Sold:							
+ Adjustments:		+/- Adjustments:		+/- Adjustments:			
End Balance:	0.0	End Balance:	0.0	End Balance:	0.0		

MESSAGE:

Reese, Debra

Period End Date: 09/18/2010

Employee #: [REDACTED]

Check Date: 09/24/2010

Company: [REDACTED]



Check No: 000138380A

BU: 10020 Dept: 203

Gross: \$594.25

Net: 542.26

Earnings Statement

Earnings	Rate	Hours	Cur Amt	YTD
REGULAR	25.00	22.00	550.00	4,825.00
SHIFT DIFF 2.00		0.00	0.00	104.50
SHIFT DIFF 3.00	3.00	14.75	44.25	418.50
EDUCATION		0.00	0.00	706.25
Total			594.25	6,054.25

Charge Code	Hours	Rate	Amount

Leave	CUR Taken	Balance Hrs

LATEST PAY STUBS

Deductions	Cur Amt	YTD
Total	0.00	0.00

Taxable Fringes	Cash	Cur Amt	YTD
Total			

Taxes	Cur Amt	Tax Wages	YTD Tax
FEDERAL	6.53	594.25	214.19
MEDICARE	8.62	594.25	87.79
OASDI	36.84	594.25	375.36
Total	\$51.99		\$677.34

Withholding	Marital	Exemptions
State: TX	M	0
Federal:	M	0

Bank	Acct Type	Net Amt
FIRST COMMUNITY BANK NA	Checking - 07818	542.26

total net pay: 542.26

$4 = 1513.56$
 $\div 169.33$

 1344.23

5354
 2194
 9384
 16.33

STATEMENT OF EARNINGS AND DEDUCTIONS - RETAIN FOR YOUR RECORDS - Fold Along Dotted Line

SOUTH TEXAS REHABILITATION HOSPIT
 425 EAST ALTON GLOOR BLVD
 BROWNSVILLE TX 78526

Date **09/24/2010**
 Deposit Advice

VOIDVOID***VOID***VOID***VOID***VOID***VOID***VOID***

Non-Negotiable

107 - 203
 Reese, Debra
 62 PIZARRO AVE
 RANCHO VIEJO, TX
 78575

not negotiable



SECURITY FEATURES INCLUDED. DETAILS ON BACK.

NOT NEGOTIABLE

Reese, Debra

Period End Date: 09/04/2010

Employee #

Check Date: 09/10/2010

Company:



Check No: 000136411A

BU: 10020

Dept: 203

Earnings Statement

Gross: \$867.25

Net: 767.07

Earnings	Rate	Hours	Cur Amt	YTD	Deductions	Cur Amt	YTD
REGULAR	25.00	31.00	775.00	4,275.00			
SHIFT DIFF 2.00		0.00	0.00	104.50			
SHIFT DIFF 3.00	3.00	30.75	92.25	374.25			
EDUCATION		0.00	0.00	706.25			
Total			867.25	5,460.00	Total	0.00	0.00

Taxable Fringes	Cash	Cur Amt	YTD
Total			

Taxes	Cur Amt	Tax Wages	YTD Tax
FEDERAL	33.83	867.25	207.66
OASDI	53.77	867.25	338.52
MEDICARE	12.58	867.25	79.17
Total	\$100.18		\$625.35

Withholding	Marital	Exemptions
State: TX	M	0
Federal:	M	0

Bank	Acct Type	Net Amt
FIRST COMMUNITY BANK NA	Checking - 07818	767.07
total net pay:		767.07

BACK
PAY
STUBS

Charge Code	Hours	Rate	Amount

Leave	CUR Taken	Balance Hrs

STATEMENT OF EARNINGS AND DEDUCTIONS - RETAIN FOR YOUR RECORDS - Fold Along Dotted Line

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SOUTH TEXAS REHABILITATION HOSPIT
425 EAST ALTON GLOOR BLVD
BROWNSVILLE TX 78526

Date
09/10/2010

Deposit
Advice

VOIDVOID***VOID***VOID***VOID***VOID***VOID***VOID***

Non-Negotiable

not negotiable



SECURITY FEATURES INCLUDED. DETAILS ON BACK.

NOT NEGOTIABLE

Reese, Debra

Employee #: 100439

Company: 107

BU: 10020 Dept: 203



ERNEST HEALTH, INC.

Period End Date: 08/21/2010

Check Date: 08/27/2010

Check No: 000134285A

Gross: \$523.00

Net: 482.99

Earnings Statement

Earnings	Rate	Hours	Cur Amt	YTD	Deductions	Cur Amt	YTD
REGULAR	25.00	18.75	468.75	3,500.00			
SHIFT DIFF 2.00	2.00	2.00	4.00	104.50			
SHIFT DIFF 3.00	3.00	16.75	50.25	282.00			
EDUCATION		0.00	0.00	706.25			
Total			523.00	4,592.75		0.00	0.00

Taxable Fringes	Cash	Cur Amt	YTD
Total			

Taxes	Cur Amt	Tax Wages	YTD Tax
FEDERAL	0.00	523.00	173.83
OASDI	32.43	523.00	284.75
MEDICARE	7.58	523.00	66.59
Total	\$40.01		\$525.17

Charge Code	Hours	Rate	Amount

Withholding	Marital	Exemptions
State: TX	M	0
Federal:	M	0

Bank	Acct Type	Net Amt
FIRST COMMUNITY BANK NA	Checking - 07818	482.99
total net pay:		482.99

STATEMENT OF EARNINGS AND DEDUCTIONS - RETAIN FOR YOUR RECORDS - Fold Along Dotted Line

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

SOUTH TEXAS REHABILITATION HOSPIT
 425 EAST ALTON GLOOR BLVD
 BROWNSVILLE TX 78526

Date
08/27/2010

Deposit
 Advice

VOIDVOID***VOID***VOID*** VOID ***VOID***VOID***

Non-Negotiable

107 - 203
 Reese, Debra
 62 PIZARRO AVE
 RANCHO VIEJO, TX
 78575

not negotiable



SECURITY FEATURES INCLUDED. DETAILS ON BACK.

NOT NEGOTIABLE

Reese, Debra

Period End Date: 08/07/2010

Employee #: 100000

Check Date: 08/13/2010

Company: [REDACTED]



Check No: 000132160A

BU: 10020 Dept: 203

Gross: \$1,274.75

Net: 1,086.04

Earnings Statement

Earnings	Rate	Hours	Cur Amt	YTD	Deductions	Cur Amt	YTD
REGULAR	25.00	40.50	1,012.50	3,031.25			
SHIFT DIFF 2.00	2.00	15.00	30.00	100.50			
SHIFT DIFF 3.00	3.00	23.25	69.75	231.75			
EDUCATION	25.00	6.50	162.50	706.25			
Total			1,274.75	4,069.75			

Taxable Fringes	Cash	Cur Amt	YTD
Total		0.00	0.00

Taxes	Cur Amt	Tax Wages	YTD Tax
FEDERAL	91.20	1,274.75	173.83
MEDICARE	18.48	1,274.75	59.01
OASDI	79.03	1,274.75	252.32
Total	\$188.71		\$485.16

Charge Code	Hours	Rate	Amount

Leave	CUR Taken	Balance Hrs

Withholding	Marital	Exemptions
State: TX	M	0
Federal:	M	0

Bank	Acct Type	Net Amt
FIRST COMMUNITY BANK NA	Checking - 07818	1,086.04

total net pay: 1,086.04

STATEMENT OF EARNINGS AND DEDUCTIONS - RETAIN FOR YOUR RECORDS - Fold Along Dotted Line

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

SOUTH TEXAS REHABILITATION HOSPIT

425 EAST ALTON GLOOR BLVD
BROWNSVILLE TX 78526

Date
08/13/2010

Deposit
Advice

VOIDVOID***VOID***VOID*** VOID ***VOID***VOID***

Non-Negotiable

not negotiable



SECURITY FEATURES INCLUDED. DETAILS ON BACK.

NOT NEGOTIABLE

B6 Summary (Official Form 6 - Summary) (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No.

Chapter **11**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$122,000.00		
B - Personal Property	Yes	6	\$77,172.12		
C - Property Claimed as Exempt	Yes	3			
D - Creditors Holding Secured Claims	Yes	1		\$328,173.37	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		\$16,349.84	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$315,234.53	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$31,749.24
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$18,002.40
	TOTAL	23	\$199,172.12	\$659,757.74	

Form 6 - Statistical Summary (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No.

Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

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

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$3,760.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$12,589.84
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$16,349.84

State the following:

Average Income (from Schedule I, Line 16)	\$31,749.24
Average Expenses (from Schedule J, Line 18)	\$18,002.40
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$39,125.30

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$16,349.84	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$315,234.53
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$315,234.53

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ **25** _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **09/29/2010** _____

Signature /s/ Jeffrey Craig Reese _____
Jeffrey Craig Reese

Date **09/29/2010** _____

Signature /s/ Debra Fay Reese _____
Debra Fay Reese

[If joint case, both spouses must sign.]

B7 (Official Form 7) (04/10)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$282,632.50	2010 year-to-date income - Debtor
\$20,342.89	2010 year-to-date income - Co-Debtor
\$493,439.00	2009 Adjusted Gross Income, per 1040 Tax Return
\$584,297.00	2008 Adjusted Gross Income, per 1040 Tax Return

2. Income other than from employment or operation of business

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

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Commerce Bk Credit Card - Line of Credit P.O. Box 80600 Kansas City, MO 64180-6000	7-1-2010	\$956.16	\$24,060.00
Discover Fin Attention: Bankruptcy Department PO Box 3025 New Albany, OH 43054	6-20-2010	\$654.47	\$18,979.00

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 1

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

4. Suits and administrative proceedings, executions, garnishments and attachments

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

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Cause No. 02CV 3240 IN THE MATTER OF THE MARRIAGE OF DEBRA SUE REESE, Petitioner and JEFFREY CRAIG REESE, Respondent	Divorce Proceeding	Court No. 4, Chapter 60 In the District Court of Kansas Civil Court Department	Decree of Divorce signed 7-24-2002

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

5. Repossessions, foreclosures and returns

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

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
BAC Home Loans 450 American St. Simi Valley, CA 93065	January 7, 2010	House located at 22315 W. 199th St. Spring Hill, KS 66083 FMV at time of foreclosure: \$285,00.00 Lien at time of foreclosure: \$288,000.00

6. Assignments and receiverships

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

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

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 2

7. Gifts

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

8. Losses

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

9. Payments related to debt counseling or bankruptcy

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

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Malaise Law Firm 1265 North Expressway 83 Brownsville, Texas 78520	7-27-2010	\$3,500.00
	9-28-2010	\$6,500.00
Tax Assistance Corporation P.O. Box 7003 Bloomfield Hills, MI 48302	November 3, 2009	\$2,505.00
	November 23, 2009	\$2,505.00
	December 11, 2009	\$2,505.00
	January 5, 2010	\$1,505.00
		(\$6,987.75 for pre-bkr fees and expenses) (\$3,012.25 for Ch 11 retainer)

10. Other transfers

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

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Jorge Becerra Brownsville, Tx 78520	August 15, 2010	Horse - Shand Fair Market Value at time of Transfer \$1,500

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

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 3

11. Closed financial accounts

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

12. Safe deposit boxes

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

13. Setoffs

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

14. Property held for another person

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

15. Prior address of debtor

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

ADDRESS	NAME USED	DATES OF OCCUPANCY
62 Pizzaro, Rancho Viejo, TX 78575	Same	January, 2010 to present
14027 Winchester Ct. Grandview, MO 64030	Same	June, 2009 to January, 2010
22315 W. 199th St. Spring Hill, KS 66083	Same	December, 2005 to May, 2009

16. Spouses and Former Spouses

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

NAME

**JEFFREY AND DEBRA REESE MARRIED SINCE 1-
20-2004**

**JEFFREY REESE PREVIOUSLY MARRIED TO
DEBRA BURGER,
8810 WEST 101ST TERRACE, OVERLAND PARK,**

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 4

**KS 66212
DIVORCED --
CLIENT STILL PAYING ALIMONY PER COURT
ORDER**

17. Environmental Information

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

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

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

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

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

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

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

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

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

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

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 5

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

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

19. Books, records and financial statements

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

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

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

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

20. Inventories

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

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

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

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

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

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

B7 (Official Form 7) (04/10) - Cont.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re: **Jeffrey Craig Reese
Debra Fay Reese**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 6

23. Withdrawals from a partnership or distributions by a corporation

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

24. Tax Consolidation Group

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

25. Pension Funds

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

[If completed by an individual or individual and spouse]

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

Date 09/29/2010

Signature /s/ Jeffrey Craig Reese
of Debtor Jeffrey Craig Reese

Date 09/29/2010

Signature /s/ Debra Fay Reese
of Joint Debtor Debra Fay Reese
(if any)

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

B 201B (Form 201B) (12/09)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

In re **Jeffrey Craig Reese**
Debra Fay Reese

Case No. _____
Chapter 11

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

Certification of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

<u>Jeffrey Craig Reese</u>	X <u>/s/ Jeffrey Craig Reese</u>	<u>09/29/2010</u>
<u>Debra Fay Reese</u>	Signature of Debtor	Date
Printed Name(s) of Debtor(s)		
Case No. (if known) _____	X <u>/s/ Debra Fay Reese</u>	<u>09/29/2010</u>
	Signature of Joint Debtor (if any)	Date

Certificate of Compliance with § 342(b) of the Bankruptcy Code

I, EDUARDO V. RODRIGUEZ, counsel for Debtor(s), hereby certify that I delivered to the Debtor(s) the Notice required by § 342(b) of the Bankruptcy Code.

/s/ EDUARDO V. RODRIGUEZ
EDUARDO V. RODRIGUEZ, Attorney for Debtor(s)
Bar No.: 00795621
Malaise Law Firm
1265 N. Expressway 83
Brownsville, TX 78520
Phone: (956) 547-9638
Fax: (956) 547-9630

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) ONLY if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2.

UNITED STATES BANKRUPTCY COURT

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

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a JOINT CASE (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

IN RE: **Jeffrey Craig Reese**
Debra Fay Reese

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 09/29/2010

Signature */s/ Jeffrey Craig Reese*
Jeffrey Craig Reese

Date 09/29/2010

Signature */s/ Debra Fay Reese*
Debra Fay Reese

Aes/student Loan Xpres
Po Box 2461
Harrisburg, PA 17105

Aes/student Loan Xpres
P.O. Box 2461
Harrisburg, PA 17105

Alliance One
Receivables Management, Inc.
P.O. Box 3107
Southeastern, PA 19398-3107

Bac Home Loans Service
450 American St
Simi Valley, CA 93065

Bank Of America Std Lo
21680 Ridgetop Cir
Sterling, VA 20166

Capital Management Services, LP
726 Exchange Street, Suite 700
Buffalo, NY 14210

Children's Mercy
Hospitals & Clinics
Patient Accounts Department
P.O. Box 804435
Kansas City, MO 94180-4435

Client Services, Inc.
3451 Harry Truman Blvd.
St. Charles, MO 63301-4047

Commerce Bank, N.A.
3930 S. 147th St.
Ste. 200
Omaha, NE 68147-9972

Commerce Bank, N.A.
Kansas City Banking Center
1000 Walnut
Kansas City, MO 64199

Commerce Bk
Credit Card - Line of Credit
P.O. Box 80600
Kansas City, MO 64180-6000

Discover Fin
Attention: Bankruptcy Department
PO Box 3025
New Albany, OH 43054

Ford Motor Credit Corporation
National Bankruptcy Center
PO Box 6275
Dearborn, MI 48121

Harris & Harris, Ltd.
600 W. Jackson
Chicago, IL 60654

Internal Revenue Service
Special Procedures
300 East 8th St., STOP 5026AUS
Austin, TX 78701

Kansas City Power and Light
P.O. Box 219330
Kansas City, MO 64121-9330

Melissa Avalos
c/o Dale Robertson
2168 E. Jackson St.
Brownsville, TX 78520

Michael Tanner, DDS
10400 W. 104rd, Suite 21
Overland Park, KS 66214-2664

Missouri Department of Revenue
Taxation Division
P.O. Box 385
Jefferson City, MO 65105-0385

NCO Financial Systems, Inc.
P.O. Box 17295
Baltimore, MD 21297

Paul and Lisa Pickard
19154 Mohawk Dr.
Stilwell, KS 66085

Sears/cbsd
701 East 60th St N
Sioux Falls, SD 57117

Sprint
P.O. Box 66075
Dallas, TX 75266-0075

State of Kansas
Office of the District Court Trustee
100 North Kansas, Suite 406
P.O. Box 760
Olathe, KS 66051-0760

Us Dept Of Education
Attn: Borrowers Service Dept
PO Box 5609
Greenville, TX 75403

Vsac Loan Services
Champlain Mill, 1 Main S
Winooski, VT 05404

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

IN RE: **Jeffrey Craig Reese
Debra Fay Reese**

CASE NO

CHAPTER 11

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
N/A	Real Property.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1.	Cash on hand.	\$100.00	\$0.00	\$100.00	\$0.00	\$100.00
2.	Checking, savings or other financial accounts, CD's or shares in banks...	\$1,447.12	\$0.00	\$2,447.12	\$0.00	\$2,447.12
3.	Security deposits with public utilities, telephone companies, landlords, others.	\$2,000.00	\$0.00	\$2,000.00	\$0.00	\$2,000.00
4.	Household goods and furnishings, including audio, video...	\$3,950.00	\$0.00	\$3,950.00	\$3,950.00	\$0.00
5.	Books, pictures and other art objects, antiques, stamp, coin, records....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Wearing apparel.	\$425.00	\$0.00	\$425.00	\$425.00	\$0.00
7.	Furs and jewelry.	\$9,550.00	\$0.00	\$9,550.00	\$2,000.00	\$7,550.00
8.	Firearms and sports, photographic and other hobby equipment.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Interests in insurance policies.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Annuities.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Education IRAs.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12.	Interests in IRA, ERISA, Keogh...	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Stock and interests in incorporated...	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Interests in partnerships....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15.	Government and corporate bonds...	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Accounts receivable.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Alimony, maintenance, support, and property settlement to which the.....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Other liquidated debts owed debtor...	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Equitable or future interests, life estates, and rights or powers.....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Contingent and noncontingent interests in estate of decedent, death benefit....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Other contingent and unliquidated claims of every nature.....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

IN RE: **Jeffrey Craig Reese
Debra Fay Reese**

CASE NO

CHAPTER 11

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
22.	Patents, copyrights, and other intellectual property.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Licenses, franchises, and other....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Customer Lists.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Automobiles, trucks, trailers, vehicles...	\$14,500.00	\$13,255.00	\$1,245.00	\$0.00	\$1,245.00
26.	Boats, motors and accessories.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Aircraft and accessories.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Office equipment, furnishings...	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Machinery, fixtures used in business.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Inventory.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Animals.	\$45,200.00	\$0.00	\$45,200.00	\$0.00	\$45,200.00
32.	Crops - growing or harvested.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Farming equipment and implements.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Farm supplies, chemicals, and feed.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other personal property of any kind.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$77,172.12	\$13,255.00	\$64,917.12	\$6,375.00	\$58,542.12

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity	
Real Property				
Missouri Property	\$122,000.00	\$107,252.00	\$14,748.00	
Personal Property				
(None)				
TOTALS:		\$122,000.00	\$107,252.00	\$14,748.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
BROWNSVILLE DIVISION**

IN RE: **Jeffrey Craig Reese**
Debra Fay Reese

CASE NO

CHAPTER 11

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Personal Property

Cash on hand	\$100.00		\$100.00	\$100.00
Checking Acct # xx 7818 at First Community Bank styled Jeff	\$2,447.12		\$2,447.12	\$2,447.12
Security Deposit held by Landlord - D. Robertson	\$2,000.00		\$2,000.00	\$2,000.00
Her: Wedding Ring	\$9,000.00		\$9,000.00	\$7,500.00
Her: Necklaces	\$50.00		\$50.00	\$50.00
2006 Lincoln Mark LT Automobile, driven by Co-Debtor	\$14,000.00	\$13,255.00	\$745.00	\$745.00
2003 Mitsubishi Galant, Driven by Debtor	\$500.00		\$500.00	\$500.00
HORSE - Natcho, Age 8	\$35,000.00		\$35,000.00	\$35,000.00
HORSE -- Cowboy, Age 8	\$10,000.00		\$10,000.00	\$10,000.00
8 finches	\$200.00		\$200.00	\$200.00
TOTALS:	\$73,297.12	\$13,255.00	\$60,042.12	\$58,542.12

Summary	
A. Gross Property Value (not including surrendered property)	\$77,172.12
B. Gross Property Value of Surrendered Property	\$122,000.00
C. Total Gross Property Value (A+B)	\$199,172.12
D. Gross Amount of Encumbrances (not including surrendered property)	\$13,255.00
E. Gross Amount of Encumbrances on Surrendered Property	\$107,252.00
F. Total Gross Encumbrances (D+E)	\$120,507.00
G. Total Equity (not including surrendered property) / (A-D)	\$64,917.12
H. Total Equity in surrendered items (B-E)	\$14,748.00
I. Total Equity (C-F)	\$79,665.12
J. Total Exemptions Claimed	\$6,375.00
K. Total Non-Exempt Property Remaining (G-J)	\$58,542.12