

**Fill in this information to identify the case:**

United States Bankruptcy Court for the:

**WESTERN DISTRICT OF TEXAS**Case number (if known): \_\_\_\_\_ Chapter **11**☐ Check if this is an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy****04/19**

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name	<b>Schrad LTD</b>	
2. All other names debtor used in the last 8 years		
Include any assumed names, trade names and <i>doing business as</i> names		
3. Debtor's federal Employer Identification Number (EIN)	<b>2 0 - 3 8 4 1 0 7 1</b>	
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<b>1314 Church View Drive</b>	
	Number Street	Number Street
		P.O. Box
	<b>St. Hedwig TX 78152</b>	
	City State ZIP Code	City State ZIP Code
	<b>Bexar</b>	Location of principal assets, if different from principal place of business
	County	
		Number Street
		City State ZIP Code
5. Debtor's website (URL)		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))	
	<input type="checkbox"/> Partnership (excluding LLP)	
	<input type="checkbox"/> Other. Specify: _____	

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

☐ Tax-exempt entity (as described in 26 U.S.C. § 501)

☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)

☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

5      3      1      1

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 1

Chapter 12

☒ No

District \_\_\_\_\_ When MM / DD / YYYY Case number \_\_\_\_\_

Debtor **Schrad LTD**

Case number (if known) \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

List all cases. If more than 1, attach a separate list.

☒ No

☐ Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_  
Case number, if known \_\_\_\_\_ MM / DD / YYYY

Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_  
Case number, if known \_\_\_\_\_ MM / DD / YYYY

**11. Why is the case filed in this district?**

*Check all that apply:*

☒ Debtor has had its domicile, 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.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** *(Check all that apply.)*

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other \_\_\_\_\_

**Where is the property?**

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**

☐ No

☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

*Check one:*

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

Debtor **Schrad LTD**

Case number (if known) \_\_\_\_\_

- |  |  |  |  |
|--|--|--|--|
| <b>14. Estimated number of creditors</b> | <input checked="" type="checkbox"/> 1-49         | <input type="checkbox"/> 1,000-5,000                 | <input type="checkbox"/> 25,001-50,000                 |
|  | <input type="checkbox"/> 50-99                   | <input type="checkbox"/> 5,001-10,000                | <input type="checkbox"/> 50,001-100,000                |
|  | <input type="checkbox"/> 100-199                 | <input type="checkbox"/> 10,001-25,000               | <input type="checkbox"/> More than 100,000             |
|  | <input type="checkbox"/> 200-999                 |  |  |
| <b>15. Estimated assets</b>              | <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
|  | <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
|  | <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
|  | <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
| <b>16. Estimated liabilities</b>         | <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
|  | <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
|  | <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
|  | <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

- 17. Declaration and signature of authorized representative of debtor**
- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
  - ☒ I have been authorized to file this petition on behalf of the debtor.
  - ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **06/03/2019**

MM / DD / YYYY

**X /s/ James E. Schrad**

Signature of authorized representative of debtor

**James E. Schrad**

Printed name

Title **President**

**18. Signature of attorney**

**X /s/ Michael J. O'Connor**

Signature of attorney for debtor

Date **06/03/2019**

MM / DD / YYYY

**Michael J. O'Connor**

Printed name

**Law Office of Michael J. O'Connor**

Firm name

**921 Proton Road**

Number Street

**San Antonio**

City

**TX**

State

**78258**

ZIP Code

**(210) 729-6009**

Contact phone

Email address

**15187400**

Bar number

State

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF TEXAS  
SAN ANTONIO DIVISION

IN RE: **Schrad LTD**

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 6/3/2019

Signature /s/ James E. Schrad  
*James E. Schrad*  
*President*

Date \_\_\_\_\_

Signature \_\_\_\_\_

Bexar County Tax Assessor  
P.O. Box 839950  
San Antonio, TX 78283-3950

Elizabeth G. Smith  
Law Offices of Elizabeth G. Smith  
6655 First Park Ten, Ste 240  
San Antonio, TX 78213

Internal Revenue Service  
Special Procedure Insolvency  
PO Box 7346  
Philadelphia, PA 19101-7346

Linebarger Goggan Blair Simpson  
711 Navarro, Ste. 300  
San Antonio, TX 78205

Schertz Bank & Trust  
519 Main Street  
Schertz, TX 78154