United Sta Western D					Vol	untary Petition		
Name of Debtor (if individual, enter Last, First, Middle Best Care Chiropractic LLC	Name of Jo	Name of Joint Debtor (Spouse) (Last, First, Middle):						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						e Joint Debtor in nd trade names)		3 years
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): 46-3591967				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all):				
Street Address of Debtor (No. & Street, City, State & Zip Code):  16005 International Blvd Ste A Seatac, WA			Street Add	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):				
	ZIPCODE 9	8188						ZIPCODE
County of Residence or of the Principal Place of Busin King	ness:		County of	Residence	e or of tl	he Principal Plac	ce of Busin	ness:
Mailing Address of Debtor (if different from street address)	dress)		Mailing A	ldress of	Joint De	ebtor (if differen	t from stre	eet address):
	ZIPCODE							ZIPCODE
Location of Principal Assets of Business Debtor (if di	fferent from s	treet address	s above):				I	
								ZIPCODE
Type of Debtor (Form of Organization)								Code Under Which (Check one box.)
(Check <b>one</b> box.)  ☐ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)	Single A	§ 101(51B)	ss state as defined i	n 11	☐ Ch <b>T</b> Ch	apter 7 apter 9 apter 11 apter 12	Rec Mai	pter 15 Petition for ognition of a Foreign n Proceeding pter 15 Petition for
Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Stockbr	oker odity Broker				apter 13	Rec Non	ognition of a Foreign main Proceeding
	Other	g Dank		Nature of Debts (Check one box.)				
Chapter 15 Debtor Country of debtor's center of main interests:		Toy Evo	mnt Entity					
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Debtor Title 26	(Check box, is a tax-exer of the Unite	mpt Entity if applicable.) mpt organization ed States Code (ti		§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."			business debts.
Filing Fee (Check one box)						oter 11 Debtors	<u> </u>	
✓ Full Filing Fee attached			or is a small busin	s a small business debtor as defined in 11 U.S.C. § 101(51D).				
Filing Fee to be paid in installments (Applicable to				not a small business debtor as defined in 11 U.S.C. § 101(51D).				
only). Must attach signed application for the court's consideration certifying that the debtor is unable to except in installments. Rule 1006(b). See Official F	pay fee		r's aggregate nonce 2,490,925 (amount	subject to	adjustme	nt on 4/01/16 and	every three	to insiders or affiliates) are less e years thereafter).
☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  Check all applicable boxes:  ☐ A plan is being filed with this Acceptances of the plan were accordance with 11 U.S.C. §					etition olicited p	prepetition from		ore classes of creditors, in
					THIS SPACE IS FOR COURT USE ONLY			
Estimated Number of Creditors								
1-49 50-99 100-199 200-999 1,000 5,000		01- 000	10,001- 25,000	25,001- 50,000		50,001- 100,000	Over 100,000	
Estimated Assets  \$\sqrt{1}  \qquad             \			\$50,000,001 to \$100 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More tha	
Estimated Liabilities	00,001 to \$10	0,000,001	\$50,000,001 to	\$100,00	0,001	\$500,000,001 to \$1 billion		n

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_	Page 2
Name of Debtor(s):  Best Care Chiropractic LLC	;
st 8 Years (If more than two, attac	ch additional sheet)
Case Number:	Date Filed:
Case Number:	Date Filed:
Affiliate of this Debtor (If mo	ore than one, attach additional sheet)
Case Number:	Date Filed:
Relationship:	Judge:
(To be completed whose debts are properties of the petitioner of that I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available under the complex of the	if debtor is an individual rimarily consumer debts.) named in the foregoing petition, declare ner that [he or she] may proceed under the 11, United States Code, and have notice reach such chapter. I further certify notice required by 11 U.S.C. § 342(b).
X	
Signature of Attorney for Debtor(s)	Date
each spouse must complete and atta	nch a separate Exhibit D.)
ned a made a part of this petition.	
applicable box.) of business, or principal assets in the days than in any other District. partner, or partnership pending in a blace of business or principal assets	in the United States in this District, roceeding [in a federal or state court]
les as a Tenant of Residential 1	Property
plicable boxes.) btor's residence. (If box checked, c	complete the following.)
nat obtained judgment)	
of landlord)	
re circumstances under which the dessession, after the judgment for pos	
any rent that would become due du	uring the 30-day period after the
	Relationship:  Case Number:  Case Number:  Case Number:  Relationship:  Relationship:  I, the attorney for the petitioner that I have informed the petition chapter 7, 11, 12, or 13 of ti explained the relief available ur that I delivered to the debtor the X  Signature of Attorney for Debtor(s)  Case Number:  Relationship:  E  (To be completed whose debts are poor that I have informed the petition chapter 7, 11, 12, or 13 of ti explained the relief available ur that I delivered to the debtor the debto

# **Voluntary Petition**

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

Name of Debtor(s):

### Best Care Chiropractic LLC

# **Signatures**

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

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

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

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

X
Signature of Debtor

X
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

# Signature of a Foreign Representative

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

(Check only one box.)

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

Signature	e of Foreign	Representativ	ve	
Printed N	Name of For	eign Represei	ntative	

# Signature of Attorney\*

# X /s/ Jeffrey B. Wells

Date

Signature of Attorney for Debtor(s)

Jeffrey B. Wells 6317 Jeffrey B. Wells 500 Union Street, Ste 502 Seattle, WA 98101-2320 (206) 624-0088 Fax: (206) 624-0086 paralegal@wellsandjarvis.com

# November 7, 2014

Date

### Signature of Debtor (Corporation/Partnership)

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

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

X /s/ Joseph Ayele
Signature of Authorized Individual

Joseph Ayele
Printed Name of Authorized Individual

# Managing Member

Title of Authorized Individual

# November 7, 2014

Date

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

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

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

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

Address			

(				
	Signature			

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

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

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

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

<sup>\*</sup>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.

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

IN RE:	Case No
Best Care Chiropractic LLC	Chapter 11
Debtor(s)	* -

# LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim (if secured also state value of security)
Zions First National Bank 7730 Union Park Ave #250 Midvale, UT 84047				35,000.00
International Plaza Corp 16015 International Blvd Seatac, WA 98188	Donald Allen, Attorney 820 SW 148 St Ste 102 Seattle, WA 98166			28,000.00
Anita Jumal And Jumal Family 16005 International Blvd Seatac, WA 98188				25,000.00
Discount Water Heaters And Plumbing Inc 16417 25th Ave SE Bothell, WA 98012				10,000.00

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

I, [the president or other officer or an authorized agent of the corporation][or a member or an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date:	November 7, 2014	Signature:	/s/ Joseph Ayele
		-	

Joseph Ayele, Managing Member

(Print Name and Title)