

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____ Chapter 11

☐ Check if this is an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

12/15

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 Funeral Services, LLC

2. All other names debtor used
in the last 8 years Jerns Funeral Home

Include any assumed names,
trade names, and *doing
business
as names*

3. Debtor's federal Employer
Identification Number (EIN) 30 - 0428711

4. Debtor's address

Principal place of business

800 E Sunset Dr

Number Street

Attn: Bradley Bytnar

Bellingham, WA 98225

City State ZIP Code

Whatcom

County

Mailing address, if different from principal
place of business

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from
principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL) jernsfuneralchapel.net

6. Type of debtor

☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☒ Other. Specify: LLC

7. Describe debtor's business**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

B. Check all that apply:

- ☐ 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))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.naics.com/search/>.
____**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____
MM / DD / YYYY**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☒ No☐ Yes. Debtor _____ Relationship _____
District _____ When _____

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

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.**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,000-100,000☐ More than 100,000**15. Estimated assets**☐ \$0-\$50,000☐ \$50,001-\$100,000☐ \$100,001-\$500,000☒ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" 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 06/16/2017
MM/ DD/ YYYY

X

/s/ Bradley Bytnar
Signature of authorized representative of debtor

Bradley Bytnar
Printed name

Title Owner/Operator

18. Signature of attorney**X**

/s/ Jacob D DeGraaff
Signature of attorney for debtor

Date 06/16/2017
MM/ DD/ YYYY

Jacob D DeGraaff
Printed name

Henry, DeGraaff & McCormick, P.S.
Firm name

1833 N 105th St
Number Street

Seattle WA 98133-8973
City State ZIP Code

(206) 330-0595 jacobd@hdm-legal.com
Contact phone Email address

Bar number State

Fill in this information to identify the case:

Debtor name **Funeral Services, LLC**

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$175.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1 Bank of the Pacific

Checking account

9636

\$50,808.55

3.2 NW Federal Credit Union

Checking account

\$100.90

4. Other cash equivalents (Identify all)

Name of institution (bank or brokerage firm)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$51,084.45

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.

☒ Yes. Fill in the information below.

Current value of
debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1 Henry, DeGraaff & McCormick, P.S. IOLTA Account \$14,335.50**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

None**9. Total of Part 2.**Add lines 7 through 8. Copy the total to line 81. \$14,335.50**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of debtor's
interest**11. Accounts Receivable**11a. 90 days old or less: \$22,073.01 - \$0.00 = → \$22,073.01
face amount doubtful or uncollectible accounts11b. Over 90 days old: \$92,000.00 - \$0.00 = → \$0.00
face amount doubtful or uncollectible accounts**12. Total of Part 3**Current value on lines 11a + 11b = line 12. Copy the total to line 82. \$22,073.01**Part 4: Investments**

13. Does the debtor own any investments?

☒ No. Go to Part 5.

☐ Yes. Fill in the information below.

Valuation method
used for current value

Current value of debtor's
interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

None

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or join venture

Name of entity:

% of ownership:

None

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

None

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.

☒ Yes. Fill in the information below.

General description

Date of the last
physical inventory

Net book value of
debtor's interest
(Where available)

Valuation method used
for current value

Current value of
debtor's interest

19. Raw materials

20. Work in progress

21. Finished goods, including goods held for resale

22. Other inventory or supplies

Cardboard Cremation Trays

MM / DD / YYYY

\$3,500.00

retail

(Unknown)

23. **Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

\$0.00

24. **Is any of the property listed in Part 5 perishable?**

☒ No

☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

☒ No

☐ Yes

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

General description

**Net book value of
debtor's interest
(Where available)**

**Valuation method used
for current value**

**Current value of
debtor's interest**

28. **Crops—either planted or harvested**

None

29. **Farm animals** *Examples: Livestock, poultry, farm-raised fish*

None

30. **Farm machinery and equipment** (Other than titled motor vehicles)

None

31. **Farm and fishing supplies, chemicals, and feed**

None

32. **Other farming and fishing-related property not already listed in Part 6**

None

33. **Total of Part 6**

Add lines 28 through 32. Copy the total to line 85.

34. **Is the debtor a member of an agricultural cooperative?**

☒ No

☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No

☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

☒ No

☐ Yes

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
Crematory	\$30,448.93		(Unknown)
Totem Pole	\$5,839.00		(Unknown)
41. Office equipment, including all computer equipment and communication systems equipment and software			
Embalming Table	(Unknown)		\$200.00
hydraulic lift	(Unknown)		(Unknown)
Computer equipment and server	(Unknown)		\$200.00
42. Collectibles Examples: Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
None			
43. Total of Part 7 Add lines 39 through 42. Copy the total to line 86.			\$400.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 <u>1997 Lincoln Towncar Hearse</u>	<u>(Unknown)</u>		<u>\$1,000.00</u>
47.2 <u>2005 Chevrolet Uplander</u>	<u>(Unknown)</u>	<u>kbb.com</u>	<u>\$711.00</u>
48. Watercraft, trailers, motors, and related accesories Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vesels <u>None</u>			
49. Aircraft and accesories <u>None</u>			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) <u>None</u>			
51. Total of Part 8 Add lines 47 through 50. Copy the total to line 87.			<div style="border: 1px solid black; padding: 5px; text-align: center;"><u>\$1,711.00</u></div>

Part 9: Real Property

52. Is a depreciation schedule available for any of the property listed in Part 8?
☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?
☒ No
☐ Yes

54. Does the debtor own or lease any real property?
☐ No. Go to Part 10.
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment, or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 <u>Funeral Home</u>	<u>Fee Simple</u>	<u>(Unknown)</u>	<u>Tax Assessment</u>	<u>\$862,209.00</u>
56. Total of Part 9 Add the current value on lines 55.1 through 55.6 and entries from any addition sheets. Copy the total to line 88.				<div style="border: 1px solid black; padding: 5px; text-align: center;"><u>\$862,209.00</u></div>
57. Is a depreciation schedule available for any of the property listed in Part 8? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☐ No
☒ Yes**Part 10:** Intangibles and Intellectual Property

59. Does the debtor own or lease any office machinery, equipment, and vehicles?

☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets <u>None</u>			
61. Internet domain names and websites			
<u>jernsfuneralchapel.net</u>	<u>(Unknown)</u>		<u>\$0.00</u>
<u>jernsfh.com</u>	<u>(Unknown)</u>		<u>\$0.00</u>
<u>mtbakercremation.com</u>	<u>(Unknown)</u>		<u>\$0.00</u>
<u>mtbakercremationsociety.com</u>	<u>(Unknown)</u>		<u>\$0.00</u>
<u>petsandpawscremation.com</u>	<u>(Unknown)</u>		<u>(Unknown)</u>
62. Licenses, franchises, and royalties <u>None</u>			
63. Customer lists, mailing lists, or other compilations <u>None</u>			
64. Other intangibles, or intellectual property <u>None</u>			
65. Goodwill <u>general goodwill of business name</u>	<u>(Unknown)</u>		<u>(Unknown)</u>
66. Total of Part 10 Add lines 60 through 65. Copy the total to line 89.			<u>\$0.00</u>

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No
☐ Yes**Part 11:** All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

- ☒ No. Go to Part 12.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

None

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$51,084.45</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$14,335.50</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$22,073.01</u>	

Debtor Funeral Services, LLC
Name

Case number (if known) _____

83. **Investments.** *Copy line 17, Part 4.* _____

84. **Inventory.** *Copy line 23, Part 5.* _____

\$0.00

85. **Farming and fishing-related assets.** *Copy line 33, Part 6.* _____

86. **Office furniture, fixtures, and equipment; and collectibles.** *Copy line 43, Part 7.* _____

\$400.00

87. **Machinery, equipment, and vehicles.** *Copy line 51, Part 8.* _____

\$1,711.00

88. **Real property.** *Copy line 56, Part 9.....* →

\$862,209.00

89. **Intangibles and intellectual property.** *Copy line 66, Part 10.* _____

\$0.00

90. **All other assets.** *Copy line 78, Part 11.* + _____

91. **Total.** Add lines 80 through 90 for each column... 91a. _____

\$89,603.96

+ 91b.

\$862,209.00

92. **Total of all property on Schedule A/B.** Lines 91a + 91b = 92.

\$951,812.96

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim
\$1,881,967.34	\$862,209.00

2.1 Creditor's name

Live Oak Banking Company

Creditor's mailing address

1741 Tiburon Dr

Wilmington, NC 28403-6244

Creditor's email address, if known

Date debt was incurred Jan 14, 2013

**Last 4 digits of account
number**

1 4 5 4

**Do multiple creditors have an interest in the same
property?**

☐ No.

☒ Yes. Specify each creditor, including this creditor, and its relative priority.

1) **Live Oak Banking Company**

2) Whatcom County Treasurer

3) Western Equipment Finance, Inc.

Describe debtor's property that is subject to a lien

Funeral Home

800 E Sunset Dr Bellingham, WA 98225

Describe the lien

Deed of Trust

Is the creditor an insider or related party?

☒ No

☐ Yes.

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional
Page, if any.**

\$1,938,528.44

Part 1: **Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim**2.2** Creditor's nameWestern Equipment Finance, Inc.

Creditor's mailing address

218 NP AveFargo, ND 58107-1389Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account
number _____Do multiple creditors have an interest in the same
property?☐ No.☒ Yes. Have you already specified the relative
priority?☐ No. Specify each creditor, including this
creditor, and its relative priority.☒ Yes. The relative priority of creditors is
specified on lines 2.1

Describe debtor's property that is subject to a lien

Funeral Home800 E Sunset Dr Bellingham, WA 98225

Describe the lien

UCC

Is the creditor an insider or related party?

☒ No☐ Yes.

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed\$33,964.41\$862,209.00

Remarks: Lien Priority Dispute - Lien claimed over fixtures

2.3 Creditor's nameWhatcom County Treasurer

Creditor's mailing address

311 Grand Ave # 104Bellingham, WA 98225Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account
number _____Do multiple creditors have an interest in the same
property?☐ No.☒ Yes. Have you already specified the relative
priority?☐ No. Specify each creditor, including this
creditor, and its relative priority.☒ Yes. The relative priority of creditors is
specified on lines 2.1

Describe debtor's property that is subject to a lien

Funeral Home800 E Sunset Dr Bellingham, WA 98225

Describe the lien

Taxes

Is the creditor an insider or related party?

☒ No☐ Yes.

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed\$22,596.69\$862,209.00

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1
did you enter the related
creditor?

Last 4 digits of
account number for
this entity

Line _____

____ _

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List Creditors Who Have Secured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p><u>Internal Revenue Service Centralized Insolvency Operation</u></p> <p><u>P. O. Box 7346</u></p> <p><u>Philadelphia, PA 19101</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u></p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the Claim:</p> <p><u>Payroll Taxes</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><u>unknown</u></p> <p><u>unknown</u></p>
2.2	<p>Priority creditor's name and mailing address</p> <p><u>Washington State Department of Revenue</u></p> <p><u>PO Box 47476</u></p> <p><u>Olympia, WA 98504-7476</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u></p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the Claim:</p> <p>_____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><u>unknown</u></p> <p><u>unknown</u></p>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>Action Pages</u> <u>2021 E. College Way</u> <u>Mt Vernon, WA 98273</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5</u> <u>1</u> <u>2</u> <u>6</u>	As of the petition filing date, the claim is: <u>\$1,196.77</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>advertising</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>Banner Bank</u> <u>54 Rainier Ave S.</u> <u>Renton, WA 98057</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>6</u> <u>5</u> <u>1</u> <u>2</u> <u>Remarks: Unsecured Line of Credit</u>	As of the petition filing date, the claim is: <u>\$12,611.71</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>DEX</u> <u>PO Box 3900</u> <u>Peoria, IL 61612</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$209.46</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>Lehtola & Cannatti, PLLC</u> <u>5001 Spring Valley Rd</u> <u>Dallas, TX 75244</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$12,092.80</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>Lutheran Message</u> <u>7010 6th St. N</u> <u>Oakdale, MN 55128</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$278.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Part 2: Additional Page

3.6	Nonpriority creditor's name and mailing address <u>Superpages Dex Media</u> <u>PO Box 619810</u> <u>DWF Airport, TX 75261</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$541.61</u>
3.7	Nonpriority creditor's name and mailing address <u>Titus, Steve</u> <u>6512 Guide Meridian Road</u> <u>Lynden, WA 98264</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>purchase of separate business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$228,835.00</u>

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1	5a.	<u>\$0.00</u>
5b. Total claims from Part 2	5b. +	<u>\$255,765.35</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<div><u>\$255,765.35</u></div>

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:
Western District of Washington, Seattle Division

Case number (if known): _____ Chapter 11

☐ Check if this is an
amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Bytnar, Bradley

800 East Sunset Drive
Street

Bellingham, WA 98225

City

State

ZIP Code

Live Oak Banking Company

☒ D

☐ E/F

☐ G

2.2

Street

City

State

ZIP Code

2.3

Street

City

State

ZIP Code

2.4

Street

City

State

ZIP Code

2.5

Street

City

State

ZIP Code

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

*Check all schedules
that apply:*

2.6 _____
Street

City State ZIP Code

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____ Chapter 11

☐ Check if this is an
amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)

1a. Real Property:

Copy line 88 from *Schedule A/B*.....

\$862,209.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*.....

\$89,603.96

1c. Total of all property:

Copy line 92 from *Schedule A/B*.....

\$951,812.96

Part 2: Summary of Liabilities

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$1,938,528.44

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$0.00

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$255,765.35

4. Total liabilities.....

Lines 2 + 3a + 3b

\$2,194,293.79

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/16

The debtor must answer every question. 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 case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2017 to Filing date
MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$219,755.84

For prior year:

From 01/01/2016 to 12/31/2016
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$493,454.78

For the year before that:

From 01/01/2015 to 12/31/2015
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other _____

\$521,452.75

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2017 to Filing date
MM/ DD/ YYYY

Total Gross Revenue:
\$0.00

For prior year:

From 01/01/2016 to 12/31/2016
MM/ DD/ YYYY MM/ DD/ YYYY

Total Gross Revenue:
\$0.00

For the year before that:

From 01/01/2015 to 12/31/2015
MM/ DD/ YYYY MM/ DD/ YYYY

Total Gross Revenue:
\$0.00

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. _____ Creditor's name _____ Street _____ _____ City State ZIP Code	_____	_____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. <u>Bytnar, Bradley</u> Creditor's name <u>800 East Sunset Drive</u> Street <u>Bellingham, WA 98225</u> City State ZIP Code Relationship to debtor <u>Member/Owner</u>	<u>2016</u>	<u>\$48,335.03</u>	<u>Compensation for work performed as funeral</u> <u>director - taken as draws due to nature of entity.</u>
4.2. <u>Bytnar, Bradley</u> Creditor's name <u>800 East Sunset Drive</u> Street <u>Bellingham, WA 98225</u> City State ZIP Code Relationship to debtor <u>Member/Owner</u>	<u>2017</u>	<u>\$15,031.25</u>	<u>Compensation for work as funeral director, taken as</u> <u>draws.</u>

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
-----------------------------	-----------------------------	------	-------------------

Debtor Funeral Services, LLC
Name

Case number (if known) _____

5.1. _____
Creditor's name

Street

City State ZIP Code

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
5.1. _____ Creditor's name _____ Street _____ City State ZIP Code	XXXX-____-____-____	_____	_____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity —within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
Western Equipment Finance, Inc v. Funeral Services, LLC d/b/a Jerns Funeral Chapel Inc., and Bradley Bytnar	collection	Ramsey County District Court, North Dakota Northeast Judicial District Name _____ Street _____ City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number 36-2017-cv-00165			

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
_____ Custodian's name _____ Street _____ City State ZIP Code	Case title _____ Case number _____ Date of order or assignment _____	Court name and address _____ Name _____ Street _____ City State ZIP Code

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

9.1. Recipient's name and address	Description of the gifts or contributions	Dates given	Value
<u>Sanctuary Church</u> Recipient's name <u>127 150th Pl SE</u> Street <u>Lynwood, WA 98087</u> City State ZIP Code	<u>1976 Ranger Sailboat</u>	<u>Feb 01, 2017</u>	<u>\$0.00</u>
Recipient's relationship to debtor <u>none</u>			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
10.1. _____	_____	_____	_____

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1.	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
	Henry, DeGraaff & McCormick, P.S.	Attorney's Fee	Dec 30, 2016	\$12,577.50
	Address	Attorney's Fee	Dec 31, 2016	
	1833 N. 105th St. 203	Attorney's Fee	Feb 03, 2017	
	Street	Attorney's Fee	May 03, 2017	
		Attorney's Fee	May 31, 2017	
	Seattle, WA 98133	Attorney's Fee	Jun 15, 2017	
	City State ZIP Code			
	Email or website address			
	jacobd@hdm-legal.com			
	Who made the payment, if not debtor?			
	Funeral Services, LLC			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.	Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
	Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	Address			
	Street			
	City State ZIP Code			
	Relationship to debtor			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy
14.1. _____ Street _____ _____ City State ZIP Code	From _____ To _____

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. _____ Facility name _____ Street _____ City State ZIP Code	_____ Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____ _____	_____ How are records kept? <i>Check all that apply:</i> <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

☐ No☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: ____ - ____ - ____ - ____ - ____
Has the plan been terminated? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1 _____ Name _____ Street _____ _____ City State ZIP Code	XXXX— _ _ _ _	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	_____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

19.1

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name			<input type="checkbox"/> No
Street			<input type="checkbox"/> Yes
	Address		
City State ZIP Code			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name _____	_____	_____	<input type="checkbox"/> No
	Street _____	_____	_____	<input type="checkbox"/> Yes
	_____	Address _____		
	City _____ State _____ ZIP Code _____	_____		

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Description of the property	Value
Matthews Aurora Funeral Solutions Name _____	_____	Computers and displays of caskets and memorials.	\$0.00
Two NorthShore Center Street _____	_____	_____	
Pittsburgh PA 15212 City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
Bytnar, Bradley Name _____	_____	Military uniforms, medals, and colle ctibles	\$1,500.00
800 East Sunset Drive Street _____	_____	_____	
Bellingham WA 98225 City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
Bytnar, Bradley Name _____	_____	Table and chairs	\$50.00
800 East Sunset Drive Street _____	_____	_____	
Bellingham WA 98225 City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
Quiring Monuments Name _____	_____	headstone and monument samples	\$0.00
9608 Aurora Ave N Street _____	_____	_____	
Seattle WA 98103 City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
<u>Bytnar, Bradley</u> Name	_____	<u>2 Antique Radios</u>	<u>\$250.00</u>
<u>800 East Sunset Drive</u> Street	_____	_____	
_____	_____	_____	
<u>Bellingham</u> <u>WA</u> <u>98225</u> City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
<u>Bytnar, Bradley</u> Name	_____	<u>Two Pianos</u>	<u>\$1,000.00</u>
<u>800 East Sunset Drive</u> Street	_____	_____	
_____	_____	_____	
<u>Bellingham</u> <u>WA</u> <u>98225</u> City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
<u>Bytnar, Bradley</u> Name	_____	<u>Antique Ice Box</u>	<u>\$150.00</u>
<u>800 East Sunset Drive</u> Street	_____	_____	
_____	_____	_____	
<u>Bellingham</u> <u>WA</u> <u>98225</u> City State ZIP Code			

Owner's name and address	Location of the property	Description of the property	Value
<u>Wilbert Funeral Services, Inc</u> Name	_____	<u>Display of urns, other product demo</u>	<u>\$0.00</u>
<u>2913. Gardner Road</u> Street	_____	<u>s</u>	
_____	_____	_____	
<u>Broadview</u> <u>IL</u> <u>60155</u> City State ZIP Code			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?**

Include settlements and orders.

☒ No☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
_____	_____	_____	<input type="checkbox"/> Pending
Case number	Name _____	_____	<input type="checkbox"/> On appeal
_____	Street _____	_____	<input type="checkbox"/> Concluded
_____	_____	_____	
	City _____ State _____ ZIP Code _____		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
_____	_____	_____	_____
Name _____	Name _____	_____	
_____	_____	_____	
Street _____	Street _____	_____	
_____	_____		
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
_____	_____	_____	_____
Name _____	Name _____	_____	
_____	_____	_____	
Street _____	Street _____	_____	
_____	_____		
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Business name and address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

25.1.

Name

Street

City State ZIP Code

EIN: _____

Dates business existed

From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

26a.1.

Artino Advisory Group

Name

From May 01, 2014 To Mar 01, 2017

1031 N. State St.

Street

Bellingham, WA 98225

City State ZIP Code

Name and address

Dates of service

26a.2.

Sheryl Carman

Name

From Mar 01, 2017 To _____

121 Claremont Pl

Street

Mount Vernon, WA 98274

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address

Dates of service

26b.1.

Name

From _____ To _____

Street

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Name and address	If any books of account and records are unavailable, explain why
26c.1. <u>Artino Advisory Group</u> Name	
<u>1031 N. State St.</u> Street	
<u>Bellingham, WA 98225</u> City State ZIP Code	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address
26d.1. _____ Name
_____ Street
_____ City State ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory

Name and address of the person who has possession of inventory records

27.1. _____
Name

Street

City State ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<u>Bytnar, Bradley</u>		<u>Member/Owner,</u>	<u>100.00 %</u>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Debtor Funeral Services, LLC
Name

Case number (if known) _____

Name	Address	Position and nature of any interest	Period during which position or interest was held
------	---------	-------------------------------------	---

_____, _____, _____ From _____
To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

30.1. _____
Name _____
Street _____

City _____ State _____ ZIP Code _____
Relationship to debtor _____

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
_____	EIN: ____ - ____ - ____ - ____ - ____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
_____	EIN: ____ - ____ - ____ - ____ - ____

Part 14: Signature and Declaration

Debtor Funeral Services, LLC
Name

Case number (if known) _____

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

I have examined the information in this *Statement of Financial Affairs* and any attachments 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 6/16/2017 12:20:55
AM
MM/ DD/ YYYY

X _____
/s/ Bradley Bytnar
Signature of individual signing on behalf of the debtor

Position or relationship to debtor
Owner/Operator

Printed name Bradley Bytnar

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☐ Yes

United States Bankruptcy Court

Western District Of Washington

In re

Funeral Services, LLC

Case No. _____

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$325.00/hr

Prior to the filing of this statement I have received \$12,664.50

Balance Due \$ 0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

6/15/2017

Date

/s/ Jacob D. DeGraaff

Signature of Attorney

Henry, DeGraaff & McCormick, P.S.

Name of law firm

Fill in this information to identify the case:

Debtor name Funeral Services, LLC

United States Bankruptcy Court for the:

Western District of Washington, Seattle Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Action Pages 2021 E. College Way Mt Vernon, WA 98273	Action Pages	advertising				\$1,196.77
2	Banner Bank 54 Rainier Ave S. Renton, WA 98057	Banner Bank (425) 254-9934 www.bannerbank.com					\$12,611.71
3	DEX Attn: Customer Care PO Box 3900 Peoria, IL 61612	DEX					\$209.46
4	Lehtola & Cannatti, PLLC 5001 Spring Valley Rd Dallas, TX 75244	Lehtola & Cannatti, PLLC					\$12,092.80
5	Live Oak Banking Company 1741 Tiburon Dr Wilmington, NC 28403-6244	Live Oak Banking Company	Deed of Trust		\$1,881,967.34	\$862,209.00	\$1,019,758.34
6	Lutheran Message 7010 6th St. N Oakdale, MN 55128	Lutheran Message					\$278.00
7	Superpages Dex Media PO Box 619810 DWF Airport, TX 75261	Superpages Dex Media					\$541.61
8	Titus, Steve 6512 Guide Meridian Road Lynden, WA 98264	Titus, Steve	purchase of separate business				\$228,835.00

Debtor Funeral Services, LLC
Name _____

Case number (if known) _____

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF WASHINGTON
SEATTLE DIVISION

IN RE: **Funeral Services, LLC**

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 06/16/2017

Signature /s/ Funeral Services, LLC

Date _____

Signature _____

Action Pages
2021 E. College Way 101
Mt Vernon, WA 98273

Banner Bank
54 Rainier Ave S.
Renton, WA 98057

Bytnar, Bradley
800 East Sunset Drive
Bellingham, WA 98225

DEX
Attn: Customer Care
PO Box 3900
Peoria, IL 61612

Internal Revenue Service
Centralized Insolvency
Operation
P. O. Box 7346
Philadelphia, PA 19101

Lehtola & Cannatti, PLLC
5001 Spring Valley Rd #400
Dallas, TX 75244

Live Oak Banking Company
1741 Tiburon Dr
Wilmington, NC 28403-6244

Lutheran Message
7010 6th St. N
Oakdale, MN 55128

Superpages Dex Media
PO Box 619810
DWF Airport, TX 75261

Titus, Steve
6512 Guide Meridian Road
Lynden, WA 98264

Washington State
Department of Revenue
Taxpayer Account Administration
PO Box 47476
Olympia, WA 98504-7476

Western Equipment Finance,
Inc.
c/o Steven A. Johnson, Vogel Law Firm
218 NP Ave
Fargo, ND 58107-1389

Whatcom County Treasurer
311 Grand Ave # 104
Bellingham, WA 98225