

**United States Bankruptcy Court
Southern District of West Virginia**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Watson, Alva Joseph	Name of Joint Debtor (Spouse) (Last, First, Middle): Watson, Vanessa Lynn
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-1455	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-8795
Street Address of Debtor (No. and Street, City, and State): 35 Wyndemere Drive Vienna, WV	Street Address of Joint Debtor (No. and Street, City, and State): 35 Wyndemere Drive Vienna, WV
ZIP Code 26105	ZIP Code 26105
County of Residence or of the Principal Place of Business: Wood	County of Residence or of the Principal Place of Business: Wood
Mailing Address of Debtor (if different from street address): P. O. Box 4240 Vienna, WV	Mailing Address of Joint Debtor (if different from street address): P. O. Box 4240 Vienna, WV
ZIP Code 26105	ZIP Code 26105

Location of Principal Assets of Business Debtor (if different from street address above):

Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
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Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information

Debtor estimates that funds will be available for distribution to unsecured creditors.
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000

Estimated Assets

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

Estimated Liabilities

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

Voluntary Petition

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

Name of Debtor(s):

Watson, Alva Joseph
Watson, Vanessa Lynn

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 /s/ Alva Joseph Watson
Signature of Debtor **Alva Joseph Watson**

X /s/ Vanessa Lynn Watson
Signature of Joint Debtor **Vanessa Lynn Watson**

Telephone Number (If not represented by attorney)

November 24, 2010
Date

Signature of Attorney*

X /s/ Joseph W. Caldwell
Signature of Attorney for Debtor(s)

Joseph W. Caldwell 586
Printed Name of Attorney for Debtor(s)

Caldwell & Riffe
Firm Name

3818 MacCorkle Ave. S.E. Suite 101
Post Office Box 4427
Charleston, WV 25364-4427

Address

Email: chuckrifee@verizon.net
(304) 925-2100 Fax: (304) 925-2193

Telephone Number

November 24, 2010
Date

*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.

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 _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

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.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy 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

X _____

Date

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.

**United States Bankruptcy Court
Southern District of West Virginia**

In re Alva Joseph Watson
Vanessa Lynn Watson

Debtor(s)

Case No. _____

Chapter 11

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

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

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

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

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

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

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

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

Active military duty in a military combat zone.

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

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

Signature of Debtor: /s/ Alva Joseph Watson
Alva Joseph Watson

Date: November 24, 2010

**United States Bankruptcy Court
Southern District of West Virginia**

In re Alva Joseph Watson
Vanessa Lynn Watson

Debtor(s)

Case No. _____

Chapter 11

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

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

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

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

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

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

Active military duty in a military combat zone.

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

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

Signature of Debtor: /s/ Vanessa Lynn Watson
Vanessa Lynn Watson

Date: November 24, 2010

United States Bankruptcy Court
Southern District of West Virginia

In re Alva Joseph Watson
Vanessa Lynn Watson

Debtor(s)

Case No. _____

Chapter 11

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; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Apollo Oil 800 1st Avenue, S. Nitro, WV 25143	Apollo Oil 800 1st Avenue, S. Nitro, WV 25143			74,000.00
Camden Clark Memorial Hospital P. O. Box 11345 Charleston, WV 25339	Camden Clark Memorial Hospital P. O. Box 11345 Charleston, WV 25339	Medical		267.07
Credit One VISA P. O. Box 60500 City of Industry, CA 91716	Credit One VISA P. O. Box 60500 City of Industry, CA 91716	Credit Card - Miscellaneous Purchases		1,184.34
Emergency Systems of Parkersburg P. O. Box 200435 Pittsburgh, PA 15251	Emergency Systems of Parkersburg P. O. Box 200435 Pittsburgh, PA 15251	Medical		280.00
Emergency Systems of Parkersburg P. O. Box 200435 Pittsburgh, PA 15251	Emergency Systems of Parkersburg P. O. Box 200435 Pittsburgh, PA 15251	Medical		280.00
Family Carpet One Route 14 (Boaz) Parkersburg, WV 26101	Family Carpet One Route 14 (Boaz) Parkersburg, WV 26101			7,000.00
Heartland Petroleum, LLC 4001 East Fifth Avenue Columbus, OH 43219	Heartland Petroleum, LLC 4001 East Fifth Avenue Columbus, OH 43219			584.35
HRRG P. O. Box 189053 Fort Lauderdale, FL 33318-9053	HRRG P. O. Box 189053 Fort Lauderdale, FL 33318-9053	Medical		468.00
Macy's P. O. Box 4581 Carol Stream, IL 60197	Macy's P. O. Box 4581 Carol Stream, IL 60197	Credit Card Miscellaneous Purchases		1,004.99
Macy's VISA P. O. Box 4581 Carol Stream, IL 60197	Macy's VISA P. O. Box 4581 Carol Stream, IL 60197	Credit Card - Miscellaneous Purchases		8,152.30

In re **Alva Joseph Watson**
Vanessa Lynn Watson

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Marietta Memorial Hospital P. O. Box 324 Marietta, OH 45750	Marietta Memorial Hospital P. O. Box 324 Marietta, OH 45750	Medical		11,304.26
Orthopedic Hospitalists Lockbox 8096 P. O. Box 8096 Philadelphia, PA 19178	Orthopedic Hospitalists Lockbox 8096 P. O. Box 8096 Philadelphia, PA 19178	Medical		335.61
Physicians, Inc. P. O. Box 449 Marietta, OH 45750	Physicians, Inc. P. O. Box 449 Marietta, OH 45750	Medical		1,000.00
Physicians, Inc. P. O. Box 449 Marietta, OH 45750	Physicians, Inc. P. O. Box 449 Marietta, OH 45750	Medical		1,384.00
Snap On Credit P. O. Box 98850 Chicago, IL 60693-8850	Snap On Credit P. O. Box 98850 Chicago, IL 60693-8850			5,314.70
St. Joseph's Hospital P. O. Box 99400 Louisville, KY 40269	St. Joseph's Hospital P. O. Box 99400 Louisville, KY 40269	Medical		524.15
Stites & Harbison, PLLC 250 West Main Street 2300 Lexington Financial Center Lexington, KY 40507-1758	Stites & Harbison, PLLC 250 West Main Street 2300 Lexington Financial Center Lexington, KY 40507-1758	Legal Fees (Valvoline) Kentucky		43,397.06
Total Care Ent. Inc. 5131 Beacon Hill Road Columbus, OH 43228	Total Care Ent. Inc. 5131 Beacon Hill Road Columbus, OH 43228	Medical		280.22
US Airways Dividend Miles Business Card Services P. O. Box 23066 Columbus, GA 31902-3066	US Airways Dividend Miles Business Card Services P. O. Box 23066 Columbus, GA 31902-3066	Credit Card		9,890.00
Valvoline Express P. O. Box 14046 Lexington, KY 40503-3511	Valvoline Express P. O. Box 14046 Lexington, KY 40503-3511	Franchise		138,862.21

In re Alva Joseph Watson
Vanessa Lynn Watson
Debtor(s)

Case No. _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

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

We, **Alva Joseph Watson** and **Vanessa Lynn Watson**, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date November 24, 2010

Signature /s/ Alva Joseph Watson
Alva Joseph Watson
Debtor

Date November 24, 2010

Signature /s/ Vanessa Lynn Watson
Vanessa Lynn Watson
Joint Debtor

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

Ally Finance
P. O. Box 380902
Minneapolis, MN 55438-0902

Apollo Oil
800 1st Avenue, S.
Nitro, WV 25143

Camden Clark Memorial Hospital
P. O. Box 11345
Charleston, WV 25339

Chase Bank
125 Putnam Street
Marietta, OH 45750

Chase Bank
Colson Services - SBA
P. O. Box 1289
Bowling Green Station Dept. 5
New York, NY 10274

Chase Bank
Asset Management
50 S. Main Street 49
Akron, OH 44308

Credit One VISA
P. O. Box 60500
City of Industry, CA 91716

Emergency Systems of Parkersburg
P. O. Box 200435
Pittsburgh, PA 15251

Family Carpet One
Route 14 (Boaz)
Parkersburg, WV 26101

Heartland Petroleum, LLC
4001 East Fifth Avenue
Columbus, OH 43219

HRRG
P. O. Box 189053
Fort Lauderdale, FL 33318-9053

LeRoys Jewelers
P. O. Box 3680
Akron, OH 44309

Macy's
P. O. Box 4581
Carol Stream, IL 60197

Macy's VISA
P. O. Box 4581
Carol Stream, IL 60197

Marietta Memorial Hospital
P. O. Box 324
Marietta, OH 45750

McNeer, Highland, McMunn & Varner, L.C.
400 West Main Street
P. O. Box 2040
Clarksburg, WV 26302-2040

Med Express Billing
P. O. Box 719
Dellslow, WV 26531-0719

Orthopedic Hospitalists
Lockbox 8096
P. O. Box 8096
Philadelphia, PA 19178

Physicians, Inc.
P. O. Box 449
Marietta, OH 45750

Sheriff of Roane County
200 Main Street
P. O. Box 69
Spencer, WV 25276

Sheriff/Treasurer of Wood County
Jeff Sandy
#1 Court Square
Parkersburg, WV 26101

Snap On Credit
P. O. Box 98850
Chicago, IL 60693-8850

St. Joseph's Hospital
P. O. Box 99400
Louisville, KY 40269

Stites & Harbison, PLLC
250 West Main Street
2300 Lexington Financial Center
Lexington, KY 40507-1758

Total Care Ent. Inc.
5131 Beacon Hill Road
Columbus, OH 43228

US Airways Dividend Miles
Business Card Services
P. O. Box 23066
Columbus, GA 31902-3066

Valvoline Express
P. O. Box 14046
Lexington, KY 40503-3511

Wells Fargo
P. O. Box 173340
Denver, CO 80217

WesBanco
410 Grand Central Avenue
Vienna, WV 26105-2193