FILING A NON-INDIVIDUAL CHAPTER 11 CASE
UNITED STATES BANKRUPTCY COURT, EASTERN DISTRICT OF CALIFORNIA
These documents are intended to help debtors filing without an attorney.

Forms and Legal Advice

Attached to this document are forms and a list of form requirements for a chapter 11 non-individual case.

You must complete and sign each required document before submitting them to the court. You may need to enter "zero" or "none" in a blank space to fully complete the form.

Federal law prohibits the bankruptcy court from giving any type of legal advice or instruction. If you have a question about how to fill out a form, it is recommended that you contact an attorney.

Legal Representation

Local Rule 183 of the U.S. District Court requires that corporations or other entities must be represented by an attorney in cases filed in the Eastern District of California. Debtors who are not individuals (e.g., debtors who are corporations, partnerships, or other entities, must, therefore, have legal representation. If a bankruptcy case is filed by a debtor who is not represented by an attorney, the Court or a party to the case may initiate actions to dismiss the case, unless the debtor obtains legal representation.

Filing Fee

For the current filing fee, see the attached **Required Forms for a Chapter 11 Case.**

Filing fees from parties filing without an attorney must be paid in person or by mail with money orders or cashier's checks. All money orders and cashier's checks must be made payable to: Clerk, U.S. Bankruptcy Court. Debit cards are also accepted in person at our Sacramento, Fresno, and Modesto offices. **No cash accepted**.

Revised 4/1/2025

Where and How to File Your Documents

If you reside in this county:	Mail or deliver your documents to and Filing Fee to:	Electronic Filing Option:
Alpine, Amador, Butte, Colusa, El Dorado, Glenn, Lassen, Modoc, Mono, Nevada, Placer Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano, Sutter, Tehama, Trinity, Yolo, Yuba	U.S. Bankruptcy Court 501 I Street, #3-200 Sacramento, CA 95814 916-930-4495	To save time and the expense of traveling to one of our courthouses, you may submit your documents online using the Online Debtor Dropbox. If your documents are accepted, you will receive a confirmation email, including copies of your documents and instructions on how to pay your filing fee. Training Videos: • How to Submit a New Case • How to Submit documents in an existing case.
Calaveras, Stanislaus, Tuolumne	U.S Bankruptcy Court 1201 I Street, #200 Modesto, CA 95354 209-521-5160	
Fresno, Inyo, Kings, Kern, Madera, Mariposa, Merced, Tulare	U.S. Bankruptcy Court 2500 Tulare Street, #2501 Fresno, CA 93721 559-499-5800	
	Please submit original signed documents to the court. If you would like a copy of the documents that you file, please provide a photocopy of each one along with the original. If you are filing by mail, please also submit a self-addressed, stamped envelope with sufficient postage to return your copies to you.	

After You File

Read everything very closely that is sent to you regarding your bankruptcy case.

A *Notice of Chapter 11 Bankruptcy Case* will be mailed to you and the creditors on the mailing list you prepared. This document will list important information such as the trustee assigned to your case, deadlines and the date, time, and location of a hearing called a "*Meeting of Creditors*." You are required to attend this hearing. At the hearing, the trustee appointed in your case will question you about your assets and documents you filed.

If you do not file all documents in your case, you will also receive a *Notice of Incomplete Filing and Notice of Intent to Dismiss Case*, which will include a list of documents that you still need to file and the due dates.

UNITED STATES BANKRUPTCY COURT – EASTERN DISTRICT OF CALIFORNIA

REQUIRED FORMS AND FEES FOR A NON-INDIVIDUAL CHAPTER 11 CASE

The current filing fee for a chapter 11 case is $1,738.00.

Forms *Please submit the original plus one copy of **each** form. The copy will be returned to you for your records.*	**Form Number Required for** **Non-Individual Debtors**	**When is this form due?**
Voluntary Petition	201 201A *(Attachment for Non-Individual Chapter 11 Debtors)*	Time of Filing
Master Address List with Verification	EDC 2-100 *For more information regarding creating and submitting your master address list, see attached Guidelines for Preparation of Master Address List*	
List of 20 Largest Unsecured Creditors	204	
Statement of Social Security Number		
Schedule A/B	206A/B	Within 14 Days of Filing
Schedule D	206D	
Schedule E/F	206E/F	
Schedule G	206G	
Schedule H	206H	
Schedule J		
Declaration About Schedules		
Declaration Under Penalty of Perjury	202	
List of Equity Security Holders	No Form Provided	
Master Equity Security Holder Address List	EDC 2-101	
Summary of Assets and Liabilities	206Sum	
Statement of Financial Affairs	207	
Attorney's Disclosure of Compensation	2030 *(Non-Individuals must be represented by an attorney.)*	
Corporate Resolution	No Form Provided	
Statement Regarding Ownership of Corporate Debtor	EDC 3-500	
Bankruptcy Petition Preparer's Notice, Declaration and Signature	Not Required	
Disclosure of Compensation of Bankruptcy Preparer		
Misc. Small Business Documents: Balance Sheet, Statement of Operations, Cash Flow Statement, Fed. Tax Return	No Forms Provided *(Only Required for Chapter 11 debtors who meet the criteria and debt limits outlined in 11 U.S.C. §101(51D).)*	

OFFICE OF THE CLERK
UNITED STATES BANKRUPTCY COURT

EASTERN DISTRICT OF CALIFORNIA

GUIDELINES FOR PREPARATION OF MASTER ADDRESS LISTS AND MASTER EQUITY SECURITY HOLDER ADDRESS LISTS

Rev. 04/2024

The following guidelines have been approved by the Court and are issued pursuant to Local Bankruptcy Rule 1007-1(b).

A Master Address List includes the names, addresses and zip codes of all creditors in a bankruptcy case. A Master Equity Security Holder Address list includes the names, addresses, and zip codes of all the equity security holders of the debtor. (NOTE: these are separate Master Address Lists.) These lists are used for noticing and must be filed at the time the petition is filed or when a bankruptcy case of a debtor which is a corporation (11 U.S.C. §101(9)) or limited partnership is converted to chapter 11.

The Court's computer system requires the Master Address List to be prepared for electronic recognition. All Master Address Lists must comply with the following guidelines.

Attorneys must prepare an electronic version of the Master Address List (and Master Equity Security Holder Address List when required by LBR 1007-1(b)) for direct submission through the court's electronic filing system. The Master Address List and Master Equity Security Holder Address List must be saved in a format (not delimited) with a .txt extension. More information on how to submit a Master Address List electronically is available at the Clerk's Office or online at: www.caeb.uscourts.gov.

Debtors not represented by an attorney, or whose petitions are prepared by a Bankruptcy Petition Preparer, must prepare the Master Address List using one of the following methods:

- In electronic format when submitting their petition online through the court's Debtor Drop Box program available at www.debtordropbox.caeb.uscourts.gov. This system will format your address list and electronically produce your required verification.
- In hard copy format, using the court's online application available at www.caeb.uscourts.gov/mal/. This guided process will help you complete the address list in the correct format and generate the required verification.
- In hard copy format, following the example and requirements below.

Debtors not represented by an attorney, or whose petitions are prepared by a Bankruptcy Petition Preparer, must prepare the Equity Security Holder Address List in hard copy format, following the example and requirements below.

Sample Master Address List

Sears Credit
123 Main Street
Sacramento, CA 95222

Wells Fargo Bank
8000 W Major Blvd
Chicago, IL 12345

Bank of Denver
123 Any Street
PO Box 1234
Denver, CO 80202

General Format Requirements

- Use only plain, 8.5 x 11 white paper.
- Do not print on both sides of the paper.
- Do not use letterhead or include page numbers, line numbers, headers, or footers.
- No handwriting, stray marks, correction fluid or tape.
- Lists should be typed in a single column on the page and prepared in Courier 10 cpi (same as 12 point on a word processor).
- Limit the name and address to 5 lines per creditor.
- Limit each line to 40 characters or less.
- Names of individuals must be in first/middle/last name order. Do not include titles, i.e., Mr., Mrs.
- Creditors must be listed alphabetically, according to the first letter of the company or first name.
- Do not include punctuation in names and addresses, including periods (.) after abbreviations or initials. One comma between the city and state is permitted.
- Do not use <u>any</u> special characters such as %. Hyphens in nine-digit zip codes are permitted.
- “Care of”, and “attention” designations may be included <u>only</u> on the second line.
- The city, state and zip code must be on the <u>last</u> line. The name of the state must be abbreviated using two upper case letters. Zip codes are mandatory.
- Foreign addresses must include the <u>complete</u> name of the country.
- Leave at least two blank lines between one creditor’s name and address and another’s. Do not leave blank lines within an address, or between a creditor’s name and address.
- Do not duplicate creditors with the same address, even if there is more than one account with that creditor. Do not include account numbers in the list of creditors.
- Do not include the debtor, joint debtor, attorney for the debtor(s), or United States Trustee on the list.
- When the Unites States is a creditor on a debt for other than taxes, it must be listed on Master Address Lists in accordance with Local Bankruptcy Rule 2002-1(a). Other federal and state agencies that have specified particular addresses to which notice of bankruptcy proceeding must be listed on Master Address Lists using the addressed shown on form EDC 2-785, Roster of Governmental Agencies.
- Every Master Address List must be accompanied by a Verification of Master Address List, form EDC 2-100.

Fill in this information to identify the case:

United States Bankruptcy Court for the:

____________________ District of ________________
(State)

Case number (*If known*): _________________________ Chapter _____

❑ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/25

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** ____

2. **All other names debtor used in the last 8 years**

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

   ____
   ____
   ____
   ____
   ____

3. **Debtor's federal Employer Identification Number** (EIN) __ __ – __ __ __ __ __ __ __

4. **Debtor's address**

   Principal place of business

   ____
   Number Street

   ____

   ____
   City State ZIP Code

   ____
   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) ____

6. Type of debtor

- ❑ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
- ❑ Partnership (excluding LLP)
- ❑ Other. Specify: ____

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.uscourts.gov/four-digit-national-association-naics-codes .

___ ___ ___ ___

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 $3,424,000 (amount subject to adjustment on 4/01/28 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).
  - ❑ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
  - ❑ 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?

If more than 2 cases, attach a separate list.

- ❑ No
- ❑ Yes. District ____________ When ____________ (MM / DD / YYYY) Case number ____________

  District ____________ When ____________ (MM / DD / YYYY) Case number ____________

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

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

- ❑ No
- ❑ Yes. Debtor ______________________ Relationship ______________
  District ______________________ When ______________ MM / DD / YYYY
  Case number, if known ______________

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	❑ 1,000-5,000	❑ 25,001-50,000
❑ 50-99	❑ 5,001-10,000	❑ 50,001-100,000
❑ 100-199	❑ 10,001-25,000	❑ More than 100,000
❑ 200-999		

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

- ❑ $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

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 _______________
MM / DD / YYYY

✘ ______________________________ ______________________________
Signature of authorized representative of debtor Printed name

Title ______________________________

18. Signature of attorney

✘ ______________________________ Date _______________
Signature of attorney for debtor MM / DD / YYYY

____
Printed name

____
Firm name

____
Number Street

______________________________ __________ ______________
City State ZIP Code

______________________________ ______________________________
Contact phone Email address

______________________________ __________
Bar number State

[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

[Caption as in Form 416B]

Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is _______________.

2. The following financial data is the latest available information and refers to the debtor's condition on _______________.

a. Total assets $__________________________

b. Total debts (including debts listed in 2.c., below) $ __________________________

c. Debt securities held by more than 500 holders

				Approximate number of holders:
secured ☐	unsecured ☐	subordinated ☐	$ ________________________	______________
secured ☐	unsecured ☐	subordinated ☐	$ ________________________	______________
secured ☐	unsecured ☐	subordinated ☐	$ ________________________	______________
secured ☐	unsecured ☐	subordinated ☐	$ ________________________	______________
secured ☐	unsecured ☐	subordinated ☐	$ ________________________	______________

d. Number of shares of preferred stock ______________
e. Number of shares common stock ______________

Comments, if any: ____
____
____

3. Brief description of debtor's business: ______________________________________
____
____

4. List the names of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor:
____
____
____

Fill in this information to identify the case:
Debtor name ______________________________
United States Bankruptcy Court for the: ____________ District of ________ (State)
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							
2							
3							
4							
5							
6							
7							
8							

Debtor ______________________________ Case number (*if known*) ______________________________
Name

	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							

Fill in this information to identify the case:

Debtor name ______________________________

United States Bankruptcy Court for the:______________________ District of ________
(State)

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**	$__________
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. ______________________	__________	___ ___ ___ ___	$__________
3.2. ______________________	__________	___ ___ ___ ___	$__________

4. **Other cash equivalents** *(Identify all)*

4.1. ______________________________ $__________

4.2. ______________________________ $__________

5. **Total of Part 1**

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

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. ______________________________ $__________

7.2. ______________________________ $__________

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1.______________________________ $__________

8.2.______________________________ $__________

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81. $__________

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: __________ face amount – __________ doubtful or uncollectible accounts = ...➔ $__________

11b. Over 90 days old: __________ 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. $__________

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:		
14. 1. ____________________	__________	$__________
14. 2. ____________________	__________	$__________
15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**		
Name of entity: % of ownership:		
15.1.____________________ ______%	__________	$__________
15.2.____________________ ______%	__________	$__________
16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**		
Describe:		
16.1.____________________	__________	$__________
16.2.____________________	__________	$__________

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**				
	______________________	________ MM / DD / YYYY	$__________	__________	$__________
20.	**Work in progress**				
	______________________	________ MM / DD / YYYY	$__________	__________	$__________
21.	**Finished goods, including goods held for resale**				
	______________________	________ MM / DD / YYYY	$__________	__________	$__________
22.	**Other inventory or supplies**				
	______________________	________ MM / DD / YYYY	$__________	__________	$__________

23. **Total of Part 5**
    Add lines 19 through 22. Copy the total to line 84. $__________

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. Book value ____________ Valuation method______________ Current value__________

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**			
	______________________	$__________	__________	$__________
29.	**Farm animals** *Examples*: Livestock, poultry, farm-raised fish			
	______________________	$__________	__________	$__________
30.	**Farm machinery and equipment** (Other than titled motor vehicles)			
	______________________	$__________	__________	$__________
31.	**Farm and fishing supplies, chemicals, and feed**			
	______________________	$__________	__________	$__________
32.	**Other farming and fishing-related property not already listed in Part 6**			
	______________________	$__________	__________	$__________

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. Book value $_____________ Valuation method _________________ Current value $______________

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**			
____________________	$__________	__________	$__________
41. **Office equipment, including all computer equipment and communication systems equipment and software**			
____________________	$__________	__________	$__________
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			
42.1____________________	$__________	__________	$__________
42.2____________________	$__________	__________	$__________
42.3____________________	$__________	__________	$__________

43. **Total of Part 7.** $____________________
Add lines 39 through 42. Copy the total to line 86.

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____________________	$__________	__________	$__________
47.2____________________	$__________	__________	$__________
47.3____________________	$__________	__________	$__________
47.4____________________	$__________	__________	$__________
48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1____________________	$__________	__________	$__________
48.2____________________	$__________	__________	$__________
49. **Aircraft and accessories**			
49.1____________________	$__________	__________	$__________
49.2____________________	$__________	__________	$__________
50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**			
____________________	$__________	__________	$__________
51. **Total of Part 8.** Add lines 47 through 50. Copy the total to line 87.			$__________

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

Part 9: Real property

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 an 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______	______	$______	______	$______
55.2______	______	$______	______	$______
55.3______	______	$______	______	$______
55.4______	______	$______	______	$______
55.5______	______	$______	______	$______
55.6______	______	$______	______	$______

56. **Total of Part 9.**
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88. $______

57. **Is a depreciation schedule available for any of the property listed in Part 9?**
- ☐ No
- ☐ 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 have any interests in intangibles or intellectual property?**
- ☐ 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** ______	$______	______	$______
61. **Internet domain names and websites** ______	$______	______	$______
62. **Licenses, franchises, and royalties** ______	$______	______	$______
63. **Customer lists, mailing lists, or other compilations** ______	$______	______	$______
64. **Other intangibles, or intellectual property** ______	$______	______	$______
65. **Goodwill** ______	$______	______	$______

66. **Total of Part 10.**
Add lines 60 through 65. Copy the total to line 89. $______

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?**
Include all interests in executory contracts and unexpired leases not previously 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)
______________________________ ______________ – ______________________ = ➔ $____________________
Total face amount   doubtful or uncollectible amount

72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)
______________________________ Tax year ___________ $____________________
______________________________ Tax year ___________ $____________________
______________________________ Tax year ___________ $____________________

73. **Interests in insurance policies or annuities**
______________________________ $____________________

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
______________________________ $____________________
Nature of claim ______________________________
Amount requested $_______________

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
______________________________ $____________________
Nature of claim ______________________________
Amount requested $_______________

76. **Trusts, equitable or future interests in property**
______________________________ $____________________

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

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.** *Copy line 5, Part 1.*	$__________		
81. **Deposits and prepayments.** *Copy line 9, Part 2.*	$__________		
82. **Accounts receivable.** *Copy line 12, Part 3.*	$__________		
83. **Investments.** *Copy line 17, Part 4.*	$__________		
84. **Inventory.** *Copy line 23, Part 5.*	$__________		
85. **Farming and fishing-related assets.** *Copy line 33, Part 6.*	$__________		
86. **Office furniture, fixtures, and equipment; and collectibles.** *Copy line 43, Part 7.*	$__________		
87. **Machinery, equipment, and vehicles.** *Copy line 51, Part 8.*	$__________		
88. **Real property.** *Copy line 56, Part 9.* . . .. ➔			$__________
89. **Intangibles and intellectual property.** *Copy line 66, Part 10.*	$__________		
90. **All other assets.** *Copy line 78, Part 11.*	+ $__________		
91. **Total.** Add lines 80 through 90 for each column. .... 91a.	$__________	+ 91b.	$__________

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

Fill in this information to identify the case:
Debtor name ______________________________
United States Bankruptcy Court for the: ______________________ District of __________ (State)
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 **Amount of claim** Do not deduct the value of collateral.

Column B **Value of collateral that supports this claim**

2.1 Creditor's name

____

Creditor's mailing address

____

____

Creditor'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. Specify each creditor, including this creditor, and its relative priority.

____

____

Describe debtor's property that is subject to a lien

________________________________ $______________ $______________

____

____

Describe the lien

____

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

2.2 Creditor's name

____

Creditor's mailing address

____

____

Creditor'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 _____

Describe debtor's property that is subject to a lien

________________________________ $______________ $______________

____

____

Describe the lien

____

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.** $______________

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._ Creditor's name

____

Creditor's mailing address

____

____

Creditor'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 _____

Describe debtor's property that is subject to a lien

____

____

____

$__________ $__________

Describe the lien

____

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

2._ Creditor's name

____

Creditor's mailing address

____

____

Creditor'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 _____

Describe debtor's property that is subject to a lien

____

____

____

$__________ $__________

Describe the lien

____

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

Debtor ____ Case number (*if known*)______________________________
Name

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 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___
	Line 2. __	___ ___ ___ ___

Fill in this information to identify the case:

Debtor ____________________

United States Bankruptcy Court for the: ____________________ District of ________
(State)

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 All Creditors with PRIORITY Unsecured 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 **Priority creditor's name and mailing address** ____________________ ____________________ ____________________ **Date or dates debt was incurred** ____________________ **Last 4 digits of account number** ___ ___ ___ ___ **Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (_____)	**As of the petition filing date, the claim is:** *Check all that apply.* ❑ Contingent ❑ Unliquidated ❑ Disputed **Basis for the claim:** ____________________ **Is the claim subject to offset?** ❑ No ❑ Yes	$__________	$__________
2.2 **Priority creditor's name and mailing address** ____________________ ____________________ ____________________ **Date or dates debt was incurred** ____________________ **Last 4 digits of account number** ___ ___ ___ ___ **Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (_____)	**As of the petition filing date, the claim is:** *Check all that apply.* ❑ Contingent ❑ Unliquidated ❑ Disputed **Basis for the claim:** ____________________ **Is the claim subject to offset?** ❑ No ❑ Yes	$__________	$__________
2.3 **Priority creditor's name and mailing address** ____________________ ____________________ ____________________ **Date or dates debt was incurred** ____________________ **Last 4 digits of account number** ___ ___ ___ ___ **Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (_____)	**As of the petition filing date, the claim is:** *Check all that apply.* ❑ Contingent ❑ Unliquidated ❑ Disputed **Basis for the claim:** ____________________ **Is the claim subject to offset?** ❑ No ❑ Yes	$__________	$__________

Debtor ______________________________ Case number (*if known*)______________________
Name

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.	Total claim	Priority amount

2._ **Priority creditor's name and mailing address** $______ $______

____
____
____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred
____

Basis for the claim:
____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2._ **Priority creditor's name and mailing address** $______ $______

____
____
____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred
____

Basis for the claim:
____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2._ **Priority creditor's name and mailing address** $______ $______

____
____
____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred
____

Basis for the claim:
____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2._ **Priority creditor's name and mailing address** $______ $______

____
____
____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred
____

Basis for the claim:
____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

Debtor ______________________________ Case number (*if known*) ______________________
Name

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**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

3.2 **Nonpriority creditor's name and mailing address**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

3.3 **Nonpriority creditor's name and mailing address**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

3.4 **Nonpriority creditor's name and mailing address**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

3.5 **Nonpriority creditor's name and mailing address**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

3.6 **Nonpriority creditor's name and mailing address**

____
____
____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ____________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$____________

Debtor ______________________________ Name   Case number (*if known*) ______________________________

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.__ **Nonpriority creditor's name and mailing address**

____

____

____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed
- ❑ Liquidated and neither contingent nor disputed

Basis for the claim: ______________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$______________

3.__ **Nonpriority creditor's name and mailing address**

____

____

____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ______________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$______________

3.__ **Nonpriority creditor's name and mailing address**

____

____

____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ______________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$______________

3.__ **Nonpriority creditor's name and mailing address**

____

____

____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ______________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$______________

3.__ **Nonpriority creditor's name and mailing address**

____

____

____

Date or dates debt was incurred ____________

Last 4 digits of account number ___ ___ ___ ___

As of the petition filing date, the claim is:
Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Basis for the claim: ______________

Is the claim subject to offset?
- ❑ No
- ❑ Yes

$______________

Debtor ____ Case number (*if known*)_______________________________
Name

Part 3: List Others to Be Notified About Unsecured Claims

4. **List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.2.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.3.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.4.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
41.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.5.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.6.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.7.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.8.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.9.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.10.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___
4.11.		Line _____ ❑ Not listed. Explain _______________	___ ___ ___ ___

Debtor ______________________________ Case number *(if known)* ______________________
Name

Part 3: Additional Page for Others to Be Notified About Unsecured Claims

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___
4.__ ______________________________	Line _____ ☐ Not listed. Explain ______________	___ ___ ___ ___

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.		$______________
5b. **Total claims from Part 2**	5b.	+	$______________
5c. **Total of Parts 1 and 2** Lines 5a + 5b = 5c.	5c.		$______________

Fill in this information to identify the case:		
Debtor name ____________________		
United States Bankruptcy Court for the:____________	District of ________ (State)	
Case number (If known): ____________	Chapter _____	

❑ 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	______	

Debtor ______________________________________ Case number (*if known*)______________________
Name

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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

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._	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._	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._	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._	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._	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._	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._	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 ______________________________

United States Bankruptcy Court for the:__________________ District of ________
(State)

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	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G
2.2	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G
2.3	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G
2.4	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G
2.5	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G
2.6	________	________ Street ________ ________ City State ZIP Code	________	❑ D ❑ E/F ❑ G

Debtor ______________________________ Case number *(if known)* ______________________________
Name

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.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G
2.__	____________	____________ Street ____________ ____________ City State ZIP Code	____________	❑ D ❑ E/F ❑ G

Fill in this information to identify the case:

Debtor name ______________________________

United States Bankruptcy Court for the:______________________ District of __________
(State)

Case number (If known): ____________________

☐ 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* .... $ ________

1b. **Total personal property:**
Copy line 91A from *Schedule A/B* .... $ ________

1c. **Total of all property:**
Copy line 92 from *Schedule A/B* .... $ ________

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* .... $ ________

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 6a of *Schedule E/F* .... $ ________

3b. **Total amount of claims of nonpriority amount of unsecured claims:**
Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .... + $ ________

4. **Total liabilities** .... $ ________
Lines 2 + 3a + 3b

Fill in this information to identify the case and this filing:

Debtor Name ____

United States Bankruptcy Court for the: ____________________ District of __________
(State)

Case number (*If known*): ____________________

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

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.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ❑ *Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- ❑ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ❑ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ❑ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ❑ *Schedule H: Codebtors* (Official Form 206H)
- ❑ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ❑ Amended *Schedule* ____
- ❑ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ❑ Other document that requires a declaration____________________________________

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

Executed on ____________
MM / DD / YYYY

✘ ____
Signature of individual signing on behalf of debtor

____
Printed name

____
Position or relationship to debtor

Fill in this information to identify the case:	
Debtor name	______________________
United States Bankruptcy Court for the: ______________ District of ________ (State)	
Case number (If known):	______________

❑ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/25

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 ________ MM / DD / YYYY	to	Filing date	❑ Operating a business ❑ Other ____________	$________
For prior year:	From ________ MM / DD / YYYY	to	________ MM / DD / YYYY	❑ Operating a business ❑ Other ____________	$________
For the year before that:	From ________ MM / DD / YYYY	to	________ MM / DD / YYYY	❑ Operating a business ❑ Other ____________	$________

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 ________ MM / DD / YYYY	to	Filing date	____________	$________
For prior year:	From ________ MM / DD / YYYY	to	________ MM / DD / YYYY	____________	$________
For the year before that:	From ________ MM / DD / YYYY	to	________ MM / DD / YYYY	____________	$________

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 $8,575. (This amount may be adjusted on 4/01/28 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 *Check all that apply*
3.1. ____ Creditor's name ____ Street ____ ____ City State ZIP Code	____ ____ ____	$____	☐ Secured debt ☐ Unsecured loan repayments ☐ Suppliers or vendors ☐ Services ☐ Other ____
3.2. ____ Creditor's name ____ Street ____ ____ City State ZIP Code	____ ____ ____	$____	☐ Secured debt ☐ Unsecured loan repayments ☐ Suppliers or vendors ☐ Services ☐ 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 cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than $8,575. (This amount may be adjusted on 4/01/28 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. ____ Insider's name ____ Street ____ ____ City State ZIP Code **Relationship to debtor** ____	____ ____ ____	$____	____ ____ ____
4.2. ____ Insider's name ____ Street ____ ____ City State ZIP Code **Relationship to debtor** ____	____ ____ ____	$____	____ ____ ____

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
5.1. ______ Creditor's name ______ Street ______ ______ City State ZIP Code	______ ______ ______	______	$______
5.2. ______ 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
______ Creditor's name ______ Street ______ ______ City State ZIP Code	______ ______ Last 4 digits of account number: 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
7.1. ______ **Case number** ______	______	______ Name ______ Street ______ ______ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded
Case title 7.2. ______ **Case number** ______	______	**Court or agency's name and address** ______ Name ______ Street ______ ______ City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded

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	**Court name and address**
	Case number	Name Street City State ZIP Code
	Date of order or assignment	

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

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	Recipient's name Street City State ZIP Code **Recipient's relationship to debtor**			$
9.2.	Recipient's name Street City State ZIP Code **Recipient's relationship to debtor**			$

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
			$

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

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	______________	______________	______	$______
	Address	______________		
	______________ Street			
	______________			
	______________ City State ZIP Code			
	Email or website address			
	______________			
	Who made the payment, if not debtor?			
	______________			

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	______________	______________	______	$______
	Address	______________		
	______________ Street			
	______________			
	______________ City State ZIP Code			
	Email or website address			
	______________			
	Who made the payment, if not debtor?			
	______________			

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

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

	Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1.	______________ **Address** ______________ Street ______________ ______________ City State ZIP Code **Relationship to debtor** ______________	______________ ______________	________	$________
13.2.	**Who received transfer?** ______________ **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 ________
14.2.	______________ 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	**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.	**How are records kept?**
	______________________	______________________	*Check all that apply:*
	______________________ City State ZIP Code	______________________	☐ Electronically ☐ Paper

	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
15.2.	______________________ Facility name	______________________	______________________
	______________________ Street	**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.	**How are records kept?**
	______________________	______________________	*Check all that apply:*
	______________________ City State ZIP Code	______________________	☐ Electronically ☐ 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?

☐ No

☐ 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–___ ___ ___ ___	❑ Checking ❑ Savings ❑ Money market ❑ Brokerage ❑ Other______	______	$______
18.2.	______ Name ______ Street ______ ______ City State ZIP Code	XXXX–___ ___ ___ ___	❑ Checking ❑ Savings ❑ Money market ❑ Brokerage ❑ 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

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
______ Name ______ Street ______ ______ City State ZIP Code	______ ______ ______ **Address** ______ ______	______ ______ ______	❑ No ❑ Yes

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

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
______ Name ______ Street ______ ______ City State ZIP Code	______ ______ ______ **Address** ______ ______	______ ______ ______	❑ No ❑ Yes

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
________ Name ________ Street ________ ________ 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
________ **Case number** ________	________ Name ________ Street ________ ________ City State ZIP Code	________ ________ ________	❑ Pending ❑ On appeal ❑ Concluded

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 ________ Street ________ ________ City State ZIP Code	________ Name ________ Street ________ ________ 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 Street City State ZIP Code	Name Street 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

	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 _______

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.2.	Name Street City State ZIP Code		EIN: ___ ___ – ___ ___ ___ ___ ___ ___ ___ **Dates business existed** From _______ To _______

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.3.	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.	Name ___ Street ___ ___ City ___ State ___ ZIP Code ___	From _______ To _______

	Name and address	Dates of service
26a.2.	Name ___ Street ___ ___ City ___ State ___ ZIP Code ___	From _______ To _______

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 ___ Street ___ ___ City ___ State ___ ZIP Code ___	From _______ To _______

	Name and address	Dates of service
26b.2.	Name ___ Street ___ ___ City ___ State ___ ZIP Code ___	From _______ To _______

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

	Name and address	If any books of account and records are unavailable, explain why
26c.1.	Name ___ Street ___ ___ City ___ State ___ ZIP Code ___	___ ___ ___

	Name and address	If any books of account and records are unavailable, explain why
26c.2.	_______________ Name _______________ Street _______________ _______________ 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

	Name and address
26d.2.	_______________ 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

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

27.2. ______________________________
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
____________	____________	____________	______
____________	____________	____________	______
____________	____________	____________	______
____________	____________	____________	______
____________	____________	____________	______

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.

Name	Address	Position and nature of any interest	Period during which position or interest was held
____________	____________	____________	From _____ To _____
____________	____________	____________	From _____ To _____
____________	____________	____________	From _____ To _____
____________	____________	____________	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

______________________________ ________

Name and address of recipient			

30.2 ______________________________
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

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 ______________
MM / DD / YYYY

✘ ______________________________ Printed name ______________________________
Signature of individual signing on behalf of the debtor

Position or relationship to debtor ______________________________

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?
- ❑ No
- ❑ Yes

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA

In re Debtor(s).	Bankruptcy Case No. *(If known)* :

The following additional information is required when filing this form in an adversary proceeding.

Plaintiff(s), v. Defendant(s).	Adversary Proceeding No. *(If known)* :

STATEMENT REGARDING OWNERSHIP OF CORPORATE DEBTOR/PARTY

____
[Insert name of corporate debtor/party]

Check one: ☐ DEBTOR ☐ PLAINTIFF ☐ DEFENDANT ☐ OTHER *(specify)*: ____________________

Instructions: *Federal Rule of Bankruptcy Procedure (FRBP) 7007.1 requires corporate parties to an adversary proceeding, other than the debtor or a governmental unit, to file a statement of corporate ownership with the first pleading filed. FRBP 1007(a)(1) requires corporate debtors to file with the petition a corporate ownership statement containing the information described in Rule 7007.1. Check* ***one*** *of the statements set forth below and provide any information as directed.*

☐ 1. **The following corporations directly or indirectly own 10% or more of any class of the above-named corporate debtor's/party's equity interest*:***

Name: ______________________________
Address: ______________________________

Name: ______________________________
Address: ______________________________

Name: ______________________________
Address: ______________________________

Name: ______________________________
Address: ______________________________

(For additional names, attach an addendum to this form.)

☐ 2. **There are no entities that directly or indirectly own 10% or more of any class of the above-named corporate debtor's/party's equity interest.**

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

Dated:

____
Signature of Authorized Individual for Corporate Debtor/Party

____
Printed Name of Authorized Individual for Corporate Debtor/Party

____
Title of Authorized Individual for Corporate Debtor/Party

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA

In re	)	
	)	
	)	Case No.
	)	
	)	
____________________________________	)	

VERIFICATION OF MASTER ADDRESS LIST

I (we) declare under penalty of perjury that the attached Master Address List is a true, correct, and complete list of creditors and their addresses in this case.

I (we) acknowledge the following:

- Filing a Master Address List with incomplete or incorrect addresses may mean that creditor(s) with incomplete or incorrect address(es) may not receive notification of this Bankruptcy case.

- The debtor(s) and the debtor's(s') attorney or bankruptcy petition preparer, if any, share responsibility for the accuracy and completeness of the attached Master Address.

- The Court will use the addresses on the attached Master Address List for all items that the Court mails, and will not rely on other documents filed in this case (such as schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure) to obtain or verify the addresses of creditors.

DATED:______________________________ ____________________________________
Debtor's Signature

DATED:______________________________ ____________________________________
Joint Debtor's (if any) signature

Submit this form and your Master Address List to one of the following addresses:

Sacramento Division
501 I Street, Suite 3-200
Sacramento, CA 95814

Modesto Division
1200 I Street, Suite 200
Modesto, CA 95354

Fresno Division
2500 Tulare Street, Suite 2501
Fresno, CA 93721

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA

In re	)	
	)	
	)	Case No.
	)	
	)	
______________________________________	)	

VERIFICATION OF MASTER EQUITY SECURITY HOLDER ADDRESS LIST

I declare under penalty of perjury that the attached Master Equity Security Holder Address List is a true, correct, and complete list of equity security holders and their addresses in this case.

I acknowledge the following:

- Filing a List of Equity Security Holders with incomplete or incorrect addresses may mean that equity security holders with incomplete or incorrect address(es) may not receive notification of this Bankruptcy case and/or subsequent notices in the case.

- The Court will use the addresses on the attached Master List of Equity Security Holders for all items that the Court mails and will not rely on other documents filed in this case (such as schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure) to obtain or verify the addresses of equity security holders.

DATED:______________________________ ____________________________________
Attorney for Debtor