

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

United States Bankruptcy Court for the:

District of Arizona

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

Chapter you are filing under:

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

☐ Check if this is an  
amended filing

## Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<b>1. Your full name</b>  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Laura First name  Middle name Owens Last name  Suffix (Sr., Jr., II, III)	 First name  Middle name  Last name  Suffix (Sr., Jr., II, III)
<b>2. All other names you have used in the last 8 years</b>  Include your married or maiden names and any assumed, trade names and <i>doing business as</i> names.  Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Emily First name Laura Middle name Wilson Last name  Business name (if applicable)	 First name  Middle name  Last name  Business name (if applicable)
<b>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</b>	XXX - XX - <span style="background-color: black; color: black;">XXXX</span>	XXX - XX - _____

4. Your Employer Identification Number (EIN), if any. About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

5. Where you live If Debtor 2 lives at a different address:

6. Why you are choosing this district to file for bankruptcy Check one:

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*
- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13
8. **How you will pay the fee**
- ☐ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☒ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
9. **Have you filed for bankruptcy within the last 8 years?**
- ☒ No.  
☐ Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case Number \_\_\_\_\_  
MM / DD / YYYY
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**
- ☒ No.  
☐ Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case Number, if known \_\_\_\_\_  
MM / DD / YYYY
11. **Do you rent your residence?**
- ☒ No. Go to line 12  
☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12  
☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

12. Are you a sole proprietor of any full- or part-time business?
- ☒ No. Go to Part 4.  
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City State ZIP Code

Check the appropriate box to describe your business:

- ☐ 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))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.  
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.  
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No.  
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City State ZIP Code

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
- ☒ Yes. Go to line 17
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
- ☐ Yes. Go to line 17
- 16c. State the type of debts you owe that are not consumer debts or business debts.
17. Are you filing under Chapter 7?
- ☐ No. I am not filing under Chapter 7. Go to line 18
- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No
- ☐ Yes
18. How many creditors do you estimate that you owe?
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |
19. How much do you estimate your assets to be worth?
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
20. How much do you estimate your liabilities to be?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Part 7: Sign Below**

For you

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

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

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

I understand 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 \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

Signature of Debtor 1

Executed on 12/08/2025

MM / DD / YYYY

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

**If you are not represented  
by an attorney, you do not  
need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X**

\_\_\_\_\_  
Signature of Attorney for Debtor

\_\_\_\_\_  
Date

\_\_\_\_\_  
MM / DD / YYYY

---

Printed name \_\_\_\_\_

Firm name

Number	Street
--------	--------

City	State	ZIP Code
------	-------	----------

Contact phone \_\_\_\_\_ Email address \_\_\_\_\_

Bar number	State
------------	-------

**For you if you are filing this bankruptcy without an attorney**

**If you are represented by an attorney, you do not need to file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

☐ No  
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

☐ No  
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

☒ No  
☐ Yes. Name of Person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

**X**

\_\_\_\_\_  
Signature of Debtor 1

Date 12/08/2025  
MM / DD / YYYY

Contact phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email address \_\_\_\_\_

**X**

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

Contact phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email address \_\_\_\_\_



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

Debtor 1	Laura	Owens
	First Name	Middle Name
Debtor 2		Last Name
(Spouse, if filing)	First Name	Middle Name
		Last Name

United States Bankruptcy Court for the: District of Arizona

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

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. 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 \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** \_\_\_\_\_  
Signature of Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 12/08/2025  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

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

Debtor 1	Laura	Owens
	First Name	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Last Name
United States Bankruptcy Court for the: <u>District of Arizona</u>		
Case number (If known)		

☐ Check if this is an amended filing**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets****Your assets**  
Value of what you own

1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$ 0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$ 19,950.74
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$ 19,950.74

**Part 2: Summarize Your Liabilities****Your liabilities**  
Amount you owe

2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$ 213,596.11
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	+ \$ 50,153.97
<b>Your total liabilities</b>	\$ 263,750.08

**Part 3: Summarize Your Income and Expenses**

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ 0.00
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ 3,303.02

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$
----

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$ 0.00

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

Debtor 1	Laura	Owens
	First Name	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Last Name
United States Bankruptcy Court for the:	District of Arizona	
Case number (if known)		

☐ Check if this is an amended filing

Official Form 106A/B

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

Street address, if available, or other description

City State ZIP Code

County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**☐ Check if this is community property (see instructions)**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.**

\$ 0.00

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

3.1 Make: Hyundai  
Model Tucson  
Year: 2021  
Approximate mileage: 49155  
Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ 13,000.00 \$ 17,000.00

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

- ☒ No  
☐ Yes

Make: \_\_\_\_\_  
Model \_\_\_\_\_  
Year: \_\_\_\_\_  
Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.** →

\$ 17,000.00

### Part 3: Describe Your Personal and Household Items

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

## 6. Household goods and furnishings

*Examples:* Major appliances, furniture, linens, china, kitchenware

☒ No☐ Yes. Describe. ....

\$ \_\_\_\_\_

## 7. Electronics

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe. ....

iPhone, computer

\$ 600.00

## 8. Collectibles of value

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe. ....

\$

### 9. Equipment for sports and hobbies

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe. ....

Well-used horseback riding tack

\$ 300.00

## 10. Firearms

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☒ No☐ Yes. Describe. ....

\$

## 11. Clothes

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe. ....

Shoes and clothing, much of it used

\$ 750.00

## 12. Jewelry

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe. ....

Basic, everyday jewelry (none heirlooms or anything of value)
---

\$ 250.00

### 13. Non-farm animals

*Examples:* Dogs, cats, birds, horses

- |                                     |                     |   |         |
|-------------------------------------|---------------------|---|---------|
| <input type="checkbox"/>            | No                  |   |         |
| <input checked="" type="checkbox"/> | Yes. Describe. .... | Two rescue dogs, one a 15 year old toy poodle mix and the other a 5 year old mutt | \$ 1.00 |

14. **Any other personal and household items you did not already list, including any health aids you did not list**

- |  |                      |          |
|--|----------------------|----------|
| <input type="checkbox"/> No  |                      |          |
| <input checked="" type="checkbox"/> Yes. Give specific information. .... | Prescription glasses | \$ 10.00 |

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here. \_\_\_\_\_ ➔

\$	1,911.00
----	----------

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes ..... Cash: ..... \$ 7.74

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☒ No

☐ Yes..... Institution name: \$

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes..... Institution or issuer name:  
Charles Scwab \$ 618.00  
Etrade \$ 414.00

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them ..... Name of entity: % of ownership:  
0 % \$

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them ..... Issuer name: \$

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately. Type of account: Institution name: \$



**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No  
☐ Yes..... Institution name or individual: \_\_\_\_\_ \$ \_\_\_\_\_

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No  
☐ Yes..... Issuer name and description: \_\_\_\_\_ \$ \_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**  
 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No  
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): \_\_\_\_\_ \$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No  
☐ Yes. Give specific information about them .....  \$ \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No  
☐ Yes. Give specific information about them .....  \$ \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No  
☐ Yes. Give specific information about them .....  \$ \_\_\_\_\_

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

	Federal:	\$ _____
	State:	\$ _____
	Local:	\$ _____

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information. ....

Alimony: \$ \_\_\_\_\_  
 Maintenance: \$ \_\_\_\_\_  
 Support \$ \_\_\_\_\_  
 Divorce Settlement: \$ \_\_\_\_\_  
 Property Settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value. ....

Company name:

Beneficiary:

\_\_\_\_\_ \$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☒ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**35. Any financial assets you did not already list**

☒ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →

\$ 1,039.74

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☐ No  
☐ Yes. Describe ..... \$

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☐ No  
☐ Yes. Describe ..... \$

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☐ No  
☐ Yes. Describe ..... \$

41. Inventory

- ☐ No  
☐ Yes. Describe ..... \$

42. Interests in partnerships or joint ventures

- ☐ No  
☐ Yes. Describe ..... Name of entity: % of ownership:  
0 % \$

43. Customer lists, mailing lists, or other compilations

- ☐ No  
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe ..... \$

44. Any business-related property you did not already list

- ☐ No  
☐ Yes. Give specific information ..... \$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$ 0.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

47. **Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- ☐ No  
☐ Yes .....

\$ \_\_\_\_\_

48. **Crops—either growing or harvested**

- ☐ No  
☐ Yes. Give specific information .....

\$ \_\_\_\_\_

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☐ No  
☐ Yes .....

\$ \_\_\_\_\_

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

- ☐ No  
☐ Yes .....

\$ \_\_\_\_\_

51. **Any farm- and commercial fishing-related property you did not already list**

- ☐ No  
☐ Yes. Give specific information .....

\$ \_\_\_\_\_

52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** .....



\$ \_\_\_\_\_

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information .....

\$ \_\_\_\_\_

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... →

\$ 0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 ..... →

\$ 0.00

56. Part 2: Total vehicles, line 5 \$ 17,000.00

57. Part 3: Total personal and household items, line 15 \$ 1,911.00

58. Part 4: Total financial assets, line 36 \$ 1,039.74

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$

61. Part 7: Total other property not listed, line 54 +\$ 0.00

62. Total personal property. Add lines 56 through 61. ....

\$ 19,950.74

Copy personal property total →

+\$ 19,950.74

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

\$ 19,950.74

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

Debtor 1	Laura	Owens
	First Name	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Last Name
United States Bankruptcy Court for the: <u>District of Arizona</u>		
Case number (If known)		

☐ Check if this is an amended filing

Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).**

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Clayton Echard</div> <div style="font-size: x-small;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Number</span> <span>Street</span> </div> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Phoenix</span> <span>AZ</span> </div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> </div> </div> <div style="font-size: x-small;">ZIP Code</div> <div style="margin-top: 10px;"> <b>Who owes the debt?</b> Check one.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Debtor 1 only                     <input type="checkbox"/> Debtor 2 only                     <input type="checkbox"/> Debtor 1 and Debtor 2 only                     <input type="checkbox"/> At least one of the debtors and another                     <input type="checkbox"/> Check if this claim is for a community debt                     </div> </div> <div style="margin-top: 5px;"> <b>Date debt was incurred</b> _____                 </div>	<b>Describe the property that secures the claim:</b> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Judgment from FC2023-052114</div>		\$ 196,260.11	\$ 0.00
	<div style="margin-top: 10px;"> <b>As of the date you file, the claim is:</b> Check all that apply.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Contingent                     <input type="checkbox"/> Unliquidated                     <input type="checkbox"/> Disputed                     </div> </div> <div style="margin-top: 5px;"> <b>Nature of lien.</b> Check all that apply.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)                     <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)                     <input checked="" type="checkbox"/> Judgment lien from a lawsuit                     <input type="checkbox"/> Other (including a right to offset)                     </div> </div> <div style="margin-top: 5px;"> <b>Last 4 digits of account number</b> _____                 </div>				
2.2	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">SBNA</div> <div style="font-size: x-small;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">P.O. BOX 961211</div> <div style="font-size: x-small;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>Fort Worth</span> <span>TX</span> </div> <div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> </div> </div> <div style="font-size: x-small;">ZIP Code</div> <div style="margin-top: 10px;"> <b>Who owes the debt?</b> Check one.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only                     <input type="checkbox"/> Debtor 2 only                     <input type="checkbox"/> Debtor 1 and Debtor 2 only                     <input type="checkbox"/> At least one of the debtors and another                     <input type="checkbox"/> Check if this claim is for a community debt                     </div> </div> <div style="margin-top: 5px;"> <b>Date debt was incurred</b> <u>12/19/2024</u> </div>	<b>Describe the property that secures the claim:</b> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">2021 Hyundai Tucson</div>		\$ 17,336.00	\$ _____
	<div style="margin-top: 10px;"> <b>As of the date you file, the claim is:</b> Check all that apply.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Contingent                     <input type="checkbox"/> Unliquidated                     <input type="checkbox"/> Disputed                     </div> </div> <div style="margin-top: 5px;"> <b>Nature of lien.</b> Check all that apply.                     <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)                     <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)                     <input type="checkbox"/> Judgment lien from a lawsuit                     <input type="checkbox"/> Other (including a right to offset)                     </div> </div>				

Part 1:	<b>Additional Page</b> After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	<i>Column A</i> <b>Amount of claim</b> Do not deduct the value of collateral.	<i>Column B</i> <b>Value of collateral that supports this claim</b>	<i>Column C</i> <b>Unsecured portion</b> If any
		Last 4 digits of account number _____		
		Column A dollar value totals from all pages.	\$ 213,596.11	

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
---	---



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

Debtor 1      Laura      Owens  
First Name      Middle Name      Last Name

Debtor 2  
(Spouse, if filing)      \_\_\_\_\_  
First Name      Middle Name      Last Name

United States Bankruptcy Court for the: District of ArizonaCase number  
(if known) \_\_\_\_\_☐ Check if this is an  
amended filing

Official Form 106E/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 claims and Part 2 for creditors with NONPRIORITY 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: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

- ☒ No. Go to Part 2.  
☐ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
<div><div><div>Priority Creditor's Name</div><div>Number Street</div><div>City State ZIP Code</div><div>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</div><div>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</div></div><div><div>Last 4 digits of account number</div><div>When was the debt incurred?</div><div>As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</div><div>Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify</div></div></div>	\$	\$	\$

**Part 2: List ALL of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<p><b>Afterpay</b></p> <p>Nonpriority Creditor's Name</p> <p>760 Market Street</p> <p>Number Street</p> <p>Floor 2</p> <p>San Francisco CA 94102</p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>	\$ 138.14
4.13	<p><b>Alevea Mental Health</b></p> <p>Nonpriority Creditor's Name</p> <p>2034 East Southern Avenue</p> <p>Number Street</p> <p>Tempe AZ 85282</p> <p>City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>	\$ 2,229.00
4.17	<p><b>Anthem Law</b></p> <p>Nonpriority Creditor's Name</p> <p>3715 West Anthem Way</p> <p>Number Street</p> <p>Suite 119</p> <p>Anthem AZ 85086</p> <p>City State ZIP Code</p> <p><b>Last 4 digits of account number</b> _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p>	\$ 4,100.00

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.12 Blue Cross Blue Shield of Arizona Last 4 digits of account number 5257 \$ 1,766.08

Nonpriority Creditor's Name

PO Box 81049

Number Street

When was the debt incurred?

Phoenix

AZ

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

4.2 BRCLYGAP Last 4 digits of account number \$ 783.00

Nonpriority Creditor's Name

P.O. BOX 8803

Number Street

When was the debt incurred?

Wilmington

DE

19899

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

4.3 Capital One Last 4 digits of account number \$ 235.00

Nonpriority Creditor's Name

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

PO BOX 71083

Number Street

When was the debt incurred? \_\_\_\_\_

Charlotte

NC

28272

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

4.15

Chaparral Veterinary Medical Center

Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ 4,391.09

32100 North Cave Creek Road

Number Street

When was the debt incurred? \_\_\_\_\_

Cave Creek

AZ

85331

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

4.14

Cherry Tech

Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ 1,595.00

2261 Market Street

Number Street

When was the debt incurred? \_\_\_\_\_

4689

San Francisco

CA

94114

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Yes

4.6	Comenity Nonpriority Creditor's Name PO BOX 182128 Number Street Columbus OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	\$ 1,227.00
-----	---	---	-------------

4.4	Credit One Bank Nonpriority Creditor's Name PO BOX 60500 Number Street City of Industry CA 91716-0500 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	\$ 1,581.00
-----	--	---	-------------

4.5	Credit One Bank Nonpriority Creditor's Name PO BOX 60500 Number Street City of Industry CA 91716-0500 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans	\$ 692.00
-----	--	--	-----------

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No  
☐ Yes

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.16	<u>January Technologies</u> Nonpriority Creditor's Name  <u>176 Grand Street</u> Number Street  <u>New York</u> <u>NY</u> <u>10013</u> City State ZIP Code	<u>Last 4 digits of account number</u> _____  <u>When was the debt incurred?</u> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$</b> <u>4,364.45</u>
<p><b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			

4.7	<u>Kikoff</u> Nonpriority Creditor's Name  <u>633 Folsom Street</u> Number Street  <u>Suite 300</u>  <u>San Francisco</u> <u>CA</u> <u>94107</u> City State ZIP Code	<u>Last 4 digits of account number</u> _____  <u>When was the debt incurred?</u> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<b>\$</b> <u>100.00</u>
<p><b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			

4.18	<u>Kolsrud Law</u> Nonpriority Creditor's Name  <u>1650 N 1st Ave</u> Number Street  <u>Phoenix</u> <u>AZ</u> <u>85003</u> City State ZIP Code	<u>Last 4 digits of account number</u> _____  <u>When was the debt incurred?</u> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent	<b>\$</b> <u>14,000.00</u>
<p><b>Who incurred the debt?</b> Check one.</p>			



**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

- ☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.19 Macy's Last 4 digits of account number 9860 \$ 428.82

Nonpriority Creditor's Name

P.O. Box 6167

Number Street

When was the debt incurred?

Sioux Falls SD 57117  
City State ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.8 Macys/CBNA Last 4 digits of account number \$ 428.00

Nonpriority Creditor's Name

3039 CORNWALLIS RD

Number Street

When was the debt incurred?

Durham NC 27709  
City State ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

4.9 Midland Credit Management Inc. Last 4 digits of account number 6802 \$ 1,907.52

Nonpriority Creditor's Name

PO Box 2004

Number Street

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

When was the debt incurred? \_\_\_\_\_

Warren MI 48090  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.10

Midland Credit Management Inc.

Nonpriority Creditor's Name

PO Box 2004

Number Street

Last 4 digits of account number 9447

\$ 1,046.77

When was the debt incurred? \_\_\_\_\_

Warren MI 48090  
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_

4.20

No Waste Grindings

Nonpriority Creditor's Name

515 East Carefree Highway

Number Street

#1027

Phoenix AZ 85085  
City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

\$ 1,145.00

When was the debt incurred? \_\_\_\_\_

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify \_\_\_\_\_



**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Yes

4.21	Sonoran Ranch Services Nonpriority Creditor's Name 515 East Carefree Highway Number Street #169 Phoenix AZ 85085 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	\$ 435.00
------	--	--	-----------

4.11	Syncb Carecredit Nonpriority Creditor's Name PO BOX 965036 Number Street Orlando FL 32896 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	\$ 4,463.00
------	--	--	-------------

4.22	The Valley Law Group, LLC Nonpriority Creditor's Name 3101 North Central Avenue Number Street Suite 100 Phoenix AZ 85012 City State ZIP Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans	\$ 1,942.50
------	---	---	-------------

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify \_\_\_\_\_

4.23

Waves

Last 4 digits of account number \_\_\_\_\_

\$ 210.00

Nonpriority Creditor's Name

When was the debt incurred? \_\_\_\_\_

Number Street

City State ZIP Code  
AZ

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify \_\_\_\_\_

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

4.24

Zip Pay

Last 4 digits of account number \_\_\_\_\_

\$ 945.60

Nonpriority Creditor's Name

When was the debt incurred? \_\_\_\_\_

228 Park Avenue South

Number Street

#59872

City State ZIP Code  
New York NY 10003

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. Specify \_\_\_\_\_

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes



**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a. \$ _____
	6b. Taxes and certain other debts you owe the government	6b. \$ _____
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ _____
	6e. Total. Add lines 6a through 6d.	6e. \$ _____

		Total claim
<b>Total claims from Part 2</b>	6f. Student loans	6f. \$ _____ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ _____ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ _____ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ _____ 50,153.97
	6j. Total. Add lines 6f through 6i.	6j. \$ _____ 50,153.97

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

Debtor 1	Laura	Owens	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	District of Arizona		
Case number (If known)			

☐ Check if this is an amended filing

## Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases** 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with your other schedules. You have 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: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	ATT Name  Number Street  City State ZIP Code	Cell phone contract
2.2	Santander Name  Number Street  City State ZIP Code	2021 Hyundai Tucson

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

Debtor 1      Laura      Owens  
First Name      Middle Name      Last Name

Debtor 2  
(Spouse, if filing) \_\_\_\_\_  
First Name      Middle Name      Last Name

United States Bankruptcy Court for the: District of Arizona

Case number  
(If known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 106H****Schedule H: Your Codebtors****12/15**

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No  
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.  
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☒ No  
☐ Yes. In which community state or territory did you live? \_\_\_\_\_ . Fill in the name and current address of that person.

\_\_\_\_\_  
Name of your spouse, former spouse, or legal equivalent

\_\_\_\_\_  
Number      Street

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

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Number      Street

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

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

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

Debtor 1	Laura	Owens
	First Name	Last Name
Debtor 2 (Spouse, if filing)		
	First Name	Last Name
United States Bankruptcy Court for the:	District of Arizona	
Case number (If known)		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies

**Employment Status**

- ☐ Employed
- ☒ Not employed

- ☐ Employed
- ☐ Not employed

**Occupation**

Unemployed

**Employer's name****Employer's address**

Number Street

Number Street

City State Zip Code

City State Zip Code

**How long employed there?**

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  
 If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$ 0.00	\$ _____
3. <b>Estimate and list monthly overtime pay.</b>	3.	+ \$ 0.00	+ \$ _____
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4.	\$ 0.00	\$ _____
 <b>Copy line 4 here</b> ..... ➔			
	4.	\$ 0.00	\$ _____
 5. <b>List all payroll deductions:</b>			
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a.	\$ 0.00	\$ _____
5b. <b>Mandatory contributions for retirement plans</b>	5b.	\$ 0.00	\$ _____
5c. <b>Voluntary contributions for retirement plans</b>	5c.	\$ 0.00	\$ _____
5d. <b>Required repayments of retirement fund loans</b>	5d.	\$ 0.00	\$ _____
5e. <b>Insurance</b>	5e.	\$ 0.00	\$ _____
5f. <b>Domestic support obligations</b>	5f.	\$ 0.00	\$ _____
5g. <b>Union dues</b>	5g.	\$ 0.00	\$ _____
5h. <b>Other deductions.</b> Specify: _____	5h.	+ \$ 0.00	+ \$ _____
_____	5h.	+ \$ _____	+ \$ _____
6. <b>Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$ 0.00	\$ _____
7. <b>Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.	\$ 0.00	\$ _____
 8. <b>List all other income regularly received:</b>			
8a. <b>Net income from rental property and from operating business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 0.00	\$ _____
8b. <b>Interest and dividends</b>	8b.	\$ 0.00	\$ _____
8c. <b>Family support payment that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 0.00	\$ _____
8d. <b>Unemployment compensation</b>	8d.	\$ 0.00	\$ _____



	For Debtor 1	For Debtor 2 or non-filing spouse
8e. <b>Social Security</b>	8e. \$ 0.00	\$
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f. \$ 0.00	\$
	8f. \$	\$
8g. <b>Pension or retirement income</b>	8g. \$ 0.00	\$
8h. <b>Other monthly income.</b> Specify: Family support for food and living expenses _____	8h. + \$ 0.00	+ \$
	8h. + \$	+ \$
9. <b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$
10. <b>Calculate monthly income. Add line 7 + line 9.</b> Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 0.00	+ \$ = \$ 0.00
11. <b>State all other regular contributions to the expenses that you list in <i>Schedule J</i>.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify: _____	11. + \$ 0.00	
12. <b>Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 0.00	<b>Combined monthly income</b>
13. <b>Do you expect an increase or decrease within the year after you file this form?</b>  <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

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

Debtor 1      Laura      Owens  
First Name      Middle Name      Last Name

Debtor 2  
(Spouse, if filing)      \_\_\_\_\_  
First Name      Middle Name      Last Name

United States Bankruptcy Court for the: District of Arizona

Case number  
(If known)      \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

## 1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

## 2. Do you have dependents?

- ☒ No
- ☐ Yes. Fill out this information for each dependent .....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No  
☐ Yes
- ☐ No  
☐ Yes
- ☐ No  
☐ Yes
- ☐ No  
☐ Yes
- ☐ No  
☐ Yes

## 3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**Your expenses**

## 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

		Your expenses
4c. Home maintenance, repair, and upkeep expenses	4c.	\$ 0.00
4d. Homeowner's association or condominium dues	4d.	\$ 0.00
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	\$ 0.00
6. <b>Utilities:</b>		
6a. Electricity, heat, natural gas	6a.	\$
6b. Water, sewer, garbage collection	6b.	\$
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 445.39
6d. Other Specify: _____	6d.	\$
7. <b>Food and housekeeping supplies</b>	7.	\$ 1,800.00
8. <b>Childcare and children's education costs</b>	8.	\$
9. <b>Clothing, laundry, and dry cleaning</b>	9.	\$ 225.00
10. <b>Personal care products and services</b>	10.	\$ 100.00
11. <b>Medical and dental expenses</b>	11.	\$
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 50.00
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$ 250.00
14. <b>Charitable contributions and religious donations</b>	14.	\$
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20		
15a. Life insurance	15a.	\$
15b. Health insurance	15b.	\$
15c. Vehicle insurance	15c.	\$
15d. Other. Specify: _____	15d.	\$
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: No tax liability. I am under the income threshold for owing taxes.	16.	\$
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a.	\$ 432.63
17b. Car payments for Vehicle 2	17b.	\$
17c. Other. Specify: _____	17c.	\$
17d. Other. Specify: _____	17d.	\$
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	\$
19. <b>Other payments you make to support others who do not live with you.</b>		

**Your expenses**

Specify: \_\_\_\_\_

19. \$ \_\_\_\_\_

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property

20a. \$ \_\_\_\_\_

20b. Real estate taxes

20b. \$ \_\_\_\_\_

20c. Property, homeowner's, or renter's insurance

20c. \$ \_\_\_\_\_

20d. Maintenance, repair, and upkeep expenses

20d. \$ \_\_\_\_\_

20e. Homeowner's association or condominium dues

20e. \$ \_\_\_\_\_

**21. Other.** Specify: Food and cost of living paid for by family support. \_\_\_\_\_

21. +\$ \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 3,303.02

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ \_\_\_\_\_

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 3,303.02

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 0.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 3,303.02

23c. Subtract your monthly expenses from your monthly income.  
The result is your monthly net income.

23c. \$ 0.00

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes. Explain here:

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

Debtor 1      Laura      Owens  
First Name      Middle Name      Last Name

Debtor 2  
(Spouse, if filing) \_\_\_\_\_  
First Name      Middle Name      Last Name

United States Bankruptcy Court for the: District of Arizona

Case number  
(If known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 122A-1Supp

**Statement of Exemption from Presumption of Abuse Under § 707(b)(2)** 12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have**

1. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

- ☐ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- ☒ Yes. Go to Part 2.

**Part 2: Determine Whether Military Service Provisions Apply to You**

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?

- ☒ No. Go to line 3.
- ☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Check any one of the following categories that applies:
- ☐ **I was called to active duty after September 11, 2001**, for at least 90 days and remain on active duty.
- ☐ **I was called to active duty after September 11, 2001**, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.
- ☐ **I am performing a homeland defense activity for at least 90 days.**
- ☐ **I performed a homeland defense activity for at least 90 days**, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

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

Debtor 1      Laura      Owens  
First Name      Middle Name      Last Name

Debtor 2  
(Spouse, if filing)      \_\_\_\_\_  
First Name      Middle Name      Last Name

United States Bankruptcy Court for the: District of Arizona

Case number  
(If known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy****04/25**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- ☐ Married  
☒ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**Debtor 1:****Dates Debtor 1 lived there****Debtor 2:****Dates Debtor 2 lived there**

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_☐ Same as Debtor 1

Number Street

☐ Same as Debtor 1From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

Number Street

From \_\_\_\_\_  
To \_\_\_\_\_☐ Same as Debtor 1

Number Street

☐ Same as Debtor 1From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☒ No  
☐ Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	Source of Income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____
<b>For last calendar year:</b> (January 1 to December 31, _____ ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____
<b>For last calendar year before that:</b> (January 1 to December 31, _____ ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating Business	\$ _____

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No  
☐ Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
<b>For last calendar year:</b> (January 1 to December 31, _____ ) YYYY	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
<b>For the calendar year before that:</b> (January 1 to December 31, _____ ) YYYY	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575\* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$8,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit Card
				<input type="checkbox"/> Loan Repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony

☒ No.

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				



8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No.
- ☐ Yes. List all payments that benefited an insider

Dates of payment		Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City	State ZIP Code			

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title <u>Owens v. Marraccini</u>  Case number <u>FDV18-813-693</u>	Not a debt - a DVRO I filed against Marraccini	San Francisco Superior Court Court Name  Number Street  CA City State ZIP Code	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title <u>Owens v. Gillespie</u>  Case number <u>FN2024-052375</u>	Not a debt - a DVRO I filed against Gillespie	Maricopa County Superior Court Court Name  Number Street  AZ City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>State of Arizona v. Owens</u>  Case number _____	There has not been a conviction as of date of filing	Maricopa County Superior Court Court Name  Number Street  AZ City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title <u>Owens v. Echard</u>  Case number <u>FC2023-052114</u>	Maricopa County Superior Court – civil judgment enforcement related to prior paternity case	Maricopa County Superior Court Court Name  Number Street  City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below.

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

	Describe the property	Date	Value of the property
Creditor's Name			\$
Number Street			
	Explain what happened		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
City State ZIP Code	<input type="checkbox"/> Property was attached, seized, or levied.		

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No  
☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			\$
Number Street			
City State ZIP Code	Last 4 digits of account number: XXXX-		

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No  
☐ Yes

## Part 5: List Certain Gifts and Contributions

13. **Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			

Number Street

City State ZIP Code

Person's relationship to you \_\_\_\_\_

\$ \_\_\_\_\_

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities  
that total more than \$600

Describe what you contributed

Date you  
contributed

Value

Charity's Name

Number Street

City State ZIP Code

\$ \_\_\_\_\_

## Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and  
how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

Date of your  
loss

Value of property  
lost

\$ \_\_\_\_\_

## Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid  Number Street  City State ZIP Code  Email or website address  Person Who Made the Payment, if Not You			\$

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**  
 Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid  Number Street  City State ZIP Code			\$

18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**  
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
 Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer  Number Street  City State ZIP Code			

Person's relationship to you \_\_\_\_\_

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Description and value of the property transferred

Date transfer was made

Name of trust \_\_\_\_\_

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Name of Financial Institution

XXXX- \_\_\_\_\_

☐ Checking

\$ \_\_\_\_\_

☐ Savings

Number Street

☐ Money market

☐ Brokerage

☐ Other

City

State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Who else had access to it?

Describe the contents

Do you still have it?

Name of Financial Institution _____  Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	Name _____  Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
--	---	---

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No  
☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility _____  Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	Name _____  Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- ☒ No  
☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name _____  Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	Number _____ Street _____  _____  City _____ State _____ ZIP Code _____	\$ _____

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

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



**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☒ An officer, director, or managing executive of a corporation  
☒ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Quartet Farms LLC Business Name	Describe the nature of the business  	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Number Street  	Name of accountant or bookkeeper  	Dates business existed  From _____ To _____
City State ZIP Code		
LizMax Investments LLC Business Name	Describe the nature of the business  	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Number Street  	Name of accountant or bookkeeper  	Dates business existed  From _____ To _____
City State ZIP Code		
Keybacker Inc. Business Name	Describe the nature of the business  	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Number Street  	Name of accountant or bookkeeper  	Dates business existed  From _____ To _____
City State ZIP Code		
Stylete LLC Business Name	Describe the nature of the business  	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Number Street  		

		<b>Name of accountant or bookkeeper</b>	<b>Dates business existed</b>
			From _____ To _____
City	State	ZIP Code	

28. **Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

- ☒ No  
☐ Yes. Fill in the details below.

<b>Date issued</b>	
Name	MM / DD / YYYY
Number	Street
City	State ZIP Code

**Part 12: Sign Below**

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that 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 \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

<b>X</b> _____ Signature of Debtor 1	<b>X</b> _____ Signature of Debtor 2
Date <u>12/08/2025</u>	Date _____

**Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?**

- ☒ No  
☐ Yes

**Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?**

- ☒ No  
☐ Yes. Name of Person \_\_\_\_\_ . Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

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

Debtor 1	Laura	Owens	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	District of Arizona		
Case number (If known)			

☐ Check if this is an amended filing

**Official Form 108****Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: SBNA	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property: 2021 Hyundai Tucson	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
securing debt:	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes

Part 3:

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X

Signature of Debtor 1

Date 12/08/2025

MM / DD / YYYY

X

Signature of Debtor 2

Date

MM / DD / YYYY

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

Debtor 1	Laura	Owens	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	District of Arizona		
Case number			
(If known)			

**Mailing List**

List contains the name and address of each entity included on Schedules D, E/F, G, H and Creditor Information.

Clayton Echard [REDACTED] [REDACTED] Phoenix	AZ	85020
SBNA P.O. BOX 961211  Fort Worth	TX	76161
Afterpay 760 Market Street Floor 2 San Francisco	CA	94102
Alevea Mental Health 2034 East Southern Avenue  Tempe	AZ	85282
Anthem Law 3715 West Anthem Way Suite 119 Anthem	AZ	85086
Blue Cross Blue Shield of Arizona PO Box 81049  Phoenix	AZ	
BRCLYGAP P.O. BOX 8803  Wilmington	DE	19899
Capital One PO BOX 71083  Charlotte	NC	28272

Chaparral Veterinary Medical Center 32100 North Cave Creek Road  Cave Creek	AZ	85331
Cherry Tech 2261 Market Street 4689 San Francisco	CA	94114
Comenity PO BOX 182128  Columbus	OH	43218
Credit One Bank PO BOX 60500  City of Industry	CA	91716-0500
Credit One Bank PO BOX 60500  City of Industry	CA	91716-0500
January Technologies 176 Grand Street  New York	NY	10013
Kikoff 633 Folsom Street Suite 300 San Francisco	CA	94107
Kolsrud Law 1650 N 1st Ave  Phoenix	AZ	85003
Macy's P.O. Box 6167  Sioux Falls	SD	57117
Macys/CBNA 3039 CORNWALLIS RD  Durham	NC	27709

Midland Credit Management Inc. PO Box 2004  Warren  MI 48090
Midland Credit Management Inc. PO Box 2004  Warren  MI 48090
No Waste Grindings 515 East Carefree Highway #1027 Phoenix  AZ 85085
Sonoran Ranch Services 515 East Carefree Highway #169 Phoenix  AZ 85085
Syncb Carecredit PO BOX 965036  Orlando  FL 32896
The Valley Law Group, LLC 3101 North Central Avenue Suite 100 Phoenix  AZ 85012
Waves    AZ
Zip Pay 228 Park Avenue South #59872 New York  NY 10003
ATT
Santander