

**United States Bankruptcy Court**  
**CENTRAL DISTRICT OF CALIFORNIA**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle):

**MOLINAR, SUZANNE V BK7**

Name of Joint Debtor (Spouse)(Last, First, Middle):

All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  
**NONE**

All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): **6294**

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):

Street Address of Debtor (No. & Street, City, and State):  
**32062 BAYWOOD ST.  
Lake Elsinore CA**

ZIPCODE  
**92532**

Street Address of Joint Debtor (No. & Street, City, and State):

ZIPCODE

County of Residence or of the Principal Place of Business: **RIVERSIDE**

County of Residence or of the Principal Place of Business:

Mailing Address of Debtor (if different from street address):  
**SAME**

ZIPCODE

Mailing Address of Joint Debtor (if different from street address):

ZIPCODE

Location of Principal Assets of Business Debtor (if different from street address above): **NOT APPLICABLE**

ZIPCODE

**Type of Debtor** (Form of organization)  
(Check one box.)

- Individual (includes Joint Debtors)  
*See Exhibit D on page 2 of this form.*
- Corporation (includes LLC and LLP)
- Partnership
- Other (if debtor is not one of the above entities, check this box and state type of entity below)

**Nature of Business**  
(Check one box.)

- Health Care Business
- Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)
- Railroad
- Stockbroker
- Commodity Broker
- Clearing Bank
- Other

**Tax-Exempt Entity**  
(Check box, if applicable.)

- Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).

**Chapter of Bankruptcy Code Under Which the Petition is Filed** (Check one box)

- Chapter 7
- Chapter 9
- Chapter 11
- Chapter 12
- Chapter 13
- Chapter 15 Petition for Recognition of a Foreign Main Proceeding
- Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding

**Nature of Debts** (Check one box)

- Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose"
- Debts are primarily business debts.

**Chapter 11 Debtors:**

Check one box:

- Debtor is a small business as defined in 11 U.S.C. § 101(51D).
- Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).

Check if:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.

Check all applicable boxes:

- A plan is being filed with this petition
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

**Filing Fee** (Check one box)

- Full Filing Fee attached
- Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.
- Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.

**Statistical/Administrative Information**

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

**Estimated Number of Creditors**

- 1-49
- 50-99
- 100-199
- 200-999
- 1,000-5,000
- 5,001-10,000
- 10,001-25,000
- 25,001-50,000
- 50,001-100,000
- Over 100,000

**Estimated Assets**

- \$0 to \$50,000
- \$50,001 to \$100,000
- \$100,001 to \$500,000
- \$500,001 to \$1 million
- \$1,000,001 to \$10 million
- \$10,000,001 to \$50 million
- \$50,000,001 to \$100 million
- \$100,000,001 to \$500 million
- \$500,000,001 to \$1 billion
- More than \$1 billion

**Estimated Liabilities**

- \$0 to \$50,000
- \$50,001 to \$100,000
- \$100,001 to \$500,000
- \$500,001 to \$1 million
- \$1,000,001 to \$10 million
- \$10,000,001 to \$50 million
- \$50,000,001 to \$100 million
- \$100,000,001 to \$500 million
- \$500,000,001 to \$1 billion
- More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

**FILED**

**DEC 08 2008**

CLERK U.S. BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA  
BY: \_\_\_\_\_  
Deputy Clerk

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>SUZANNE, V. MOLINAR</b>
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**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)

Exhibit A is attached and made a part of this petition

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X** *Suzanne V. Molinar* 11/20/2008

Signature of Attorney for Debtor(s) Date

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and exhibit C is attached and made a part of this petition.

No

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**  
(Check any applicable box)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**  
(Check all applicable boxes.)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

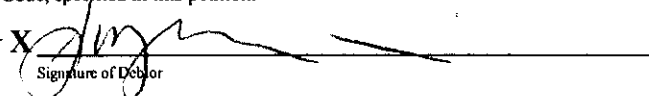
Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

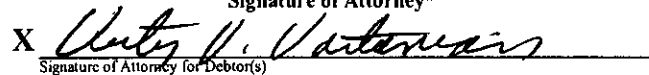
Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>SUZANNE, V. MOLINAR</b>
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**Signatures**

<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.          [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b)</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X           _____          Signature of Debtor</p> <p>X _____          Signature of Joint Debtor</p> <p>_____          Telephone Number (if not represented by attorney)</p> <p><u>11/20/2008</u>          _____          Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____          _____          (Signature of Foreign Representative)</p> <p>_____          (Printed name of Foreign Representative)</p> <p><u>11/20/2008</u>          _____          (Date)</p>
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<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X           _____          Signature of Attorney for Debtor(s)</p> <p><u>VICTOR V. VARTANIAN, ESQ. 64685</u>          _____          Printed Name of Attorney for Debtor(s)</p> <p><u>LAW OFFICES VICTOR V. VARTANIAN</u>          _____          Firm Name</p> <p><u>23193 LA CADENA, SUITE 101</u>          _____          Address</p> <p>_____  <u>LAGUNA HILLS CA 92653</u></p> <p><u>949 855-4200</u>          _____          Telephone Number</p> <p><u>11/20/2008</u>          _____          Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____          Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____          Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____          Address</p> <p>X _____          _____          Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p>
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<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____          _____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p><u>11/20/2008</u>          _____          Date</p>	<p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
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**STATEMENT OF RELATED CASES**  
**INFORMATION REQUIRED BY LOCAL BANKRUPTCY RULE 1015-2**  
**UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

NONE

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

NONE

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

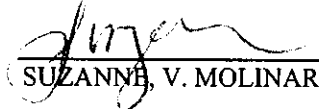
NONE

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

NONE

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

Executed at LAGUNA HILLS, California.

  
\_\_\_\_\_  
SUZANNE V. MOLINAR

Dated 11/20/2008

Name: VICTOR V. VARTANIAN, ESQ.Address: 23193 LA CADENA, SUITE 101LAGUNA HILLS, CA 92653Telephone: 949 855-4200 Fax: 949 855-4211 Attorney for Debtor Debtor in Pro Per

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

List all names including trade names, used by Debtor(s) within last 8 years:

SUZANNE, V. MOLINAR

Case No.:

**NOTICE OF AVAILABLE  
CHAPTERS**

(Notice to Individual Consumer Debtor Under § 342(b) of the Bankruptcy Code)

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

- Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:  
\_\_\_\_\_

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

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

SUZANNE, V. MOLINAR  
\_\_\_\_\_  
Printed Name(s) of Debtor(s)

*Suzanne V. Molinar*  
\_\_\_\_\_  
Signature of Debtor 11/20/2008  
Date

Case No. (if known) \_\_\_\_\_

X \_\_\_\_\_ 11/20/2008  
Signature of Joint Debtor (if any) Date

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

In re **SUZANNE, V. MOLINAR**Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	<b>Yes</b>	<b>1</b>	\$ <b>195,000.00</b>		
B-Personal Property	<b>Yes</b>	<b>3</b>	\$ <b>10,325.00</b>		
C-Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D-Creditors Holding Secured Claims	<b>Yes</b>	<b>2</b>		\$ <b>435,465.46</b>	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>1</b>		\$ <b>0.00</b>	
F-Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>3</b>		\$ <b>73,166.00</b>	
G-Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H-Codebtors	<b>Yes</b>	<b>1</b>			
I-Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>4,854.00</b>
J-Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>5,500.83</b>
<b>TOTAL</b>		<b>15</b>	\$ <b>205,325.00</b>	\$ <b>508,631.46</b>	



**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

In re *SUZANNE, V. MOLINAR*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	<b>\$ 0.00</b>

State the following:

Average Income (from Schedule I, Line 16)	\$ 4,854.00
Average Expenses (from Schedule J, Line 18)	\$ 5,500.83
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 6,138.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 235,465.46
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 73,166.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 308,631.46

In re SUZANNE, V. MOLINAR  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

### SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, In Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
32062 BAYWOOD STREET, LAKE ELSINORE, CA	Fee Simple		\$ 195,000.00	\$ 195,000.00

No continuation sheets attached

**TOTAL \$** 195,000.00  
 (Report also on Summary of Schedules.)

In re SUZANNE, V. MOLINAR  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

**SCHEDULE B-PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C		Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X				
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>CASH IN CHECKING</b> Location: In debtor's possession			\$ 100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X				
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>HOUSEHOLD FURNITURE &amp; FURNISHINGS</b> Location: In debtor's possession			\$ 750.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>BOOKS, PICTURES &amp; ART</b> Location: In debtor's possession			\$ 200.00
6. Wearing apparel.		<b>CLOTHING</b> Location: In debtor's possession			\$ 450.00
7. Furs and jewelry.		<b>JEWELRY</b> Location: In debtor's possession			\$ 125.00
8. Firearms and sports, photographic, and other hobby equipment.	X				
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issuer.	X				
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such	X				

In re SUZANNE, V. MOLINAR

Debtor(s)

Case No. \_\_\_\_\_

(if known)

**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
Interest(s). 11 U.S.C. 521(c.)				
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles and accessories.		1998 TOYOTA AVALON Location: In debtor's possession		\$ 2,000.00
		1998 TOYOTA CIENNA Location: In debtor's possession		\$ 1,700.00
		2006 TOYOTA CAMRY Location: In debtor's possession		\$ 5,000.00

In re SUZANNE, V. MOLINAR  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption		
			Husband--H	Wife--W	Joint--J Community--C
26. Boats, motors, and accessories.	X				
27. Aircraft and accessories.	X				
28. Office equipment, furnishings, and supplies.	X				
29. Machinery, fixtures, equipment and supplies used in business.	X				
30. Inventory.	X				
31. Animals.	X				
32. Crops - growing or harvested. Give particulars.	X				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	X				
35. Other personal property of any kind not already listed. Itemize.	X				

**Total** → **\$ 10,325.00**

(Report total also on Summary of Schedules.)  
Include amounts from any continuation sheets attached.

In re SUZANNE, V. MOLINAR  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE C-PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

 Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

- 11 U.S.C. § 522(b) (2)  
 11 U.S.C. § 522(b) (3)

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
CASH IN CHECKING	Calif. C.C.P. §704.080 (b) (3)	\$ 100.00	\$ 100.00
HOUSEHOLD FURNITURE & FURNISHINGS	Calif. C.C.P. §704.020 (a)	\$ 750.00	\$ 750.00
BOOKS, PICTURES & ART	Calif. C.C.P. §704.060	\$ 200.00	\$ 200.00
CLOTHING	Calif. C.C.P. §704.020 (a)	\$ 450.00	\$ 450.00
JEWELRY	Calif. C.C.P. §704.040	\$ 125.00	\$ 125.00
1998 TOYOTA AVALON	Calif. C.C.P. §704.010	\$ 0.00	\$ 2,000.00
1998 TOYOTA CIENNA	Calif. C.C.P. §704.010	\$ 1,700.00	\$ 1,700.00

In re SUZANNE, V. MOLINAR  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number <i>(See Instructions Above.)</i>	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Co-Debtor H--Husband W--Wife J--Joint C--Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if Any
Account No: 4455 Creditor # : 1 AMERICREDIT P.O. BOX 78143 Phoenix AZ 85062-8143	2006 AUTO LOAN  Value: \$ 5,000.00					\$ 7,000.00	\$ 2,000.00
Account No: 0730 Creditor # : 2 COTTONWOOD CANYON HILLS COA C/O ACTION PROPERTY MANAGEMENT P.O. BOX 25012 Santa Ana CA 92799-5012	2008  32062 BAYWOOD STREET, LAKE ELSINORE, CA  Value: \$ 195,000.00					\$ 507.84	\$ 507.84
Account No: 3968 Creditor # : 3 EMC MORTGAGE CORP P.O. BOX 619063 Dallas TX 75261	2005 SECOND MORTGAGE  Value: \$ 195,000.00					\$ 87,400.00	\$ 87,400.00
<b>Subtotal \$</b> <small>(Total of this page)</small>						<b>\$ 94,907.84</b>	<b>\$ 89,907.84</b>
<b>Total \$</b> <small>(Use only on last page)</small>							

1 continuation sheets attached

(Report also on Summary of Schedules.)  
(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

In re SUZANNE, V. MOLINAR  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Co-Debtor H--Husband W--Wife J--Joint C--Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if Any
Account No: 3885 Creditor # : 4 EMC MORTGAGE CORP P.O. BOX 619063 Dallas TX 75261	2005 FIRST MORTGAGE  Value: \$ 195,000.00					\$ 329,600.00	\$ 134,600.00
Account No: 0076 Creditor # : 5 RIVERSIDE COUNTY TREASURER 4080 LEMON STR. 1ST FLOOR Riverside CA 92502-2205	2007-2008 PROPERTY TAXES - SECIAL ASSESS 32062 BAYWOOD STREET, LAKE ELSINORE, CA  Value: \$ 195,000.00					\$ 548.00	\$ 548.00
Account No: 0076 Representing: RIVERSIDE COUNTY TREASURER	DOLINKA GROUP P.O. BOX 12677 Newport Beach CA 92658-8073  Value:						
Account No: 0076 Creditor # : 6 RIVERSIDE COUNTY TREASURER 4080 LEMON STR. 1ST FLOOR Riverside CA 92502-2205	2008 PROPERTY TAXES 32062 BAYWOOD STREET, LAKE ELSINORE, CA  Value: \$ 195,000.00					\$ 4,658.34	\$ 4,658.34
Account No: 0076 Creditor # : 7 RIVERSIDE COUNTY TREASURER 4080 LEMON STR. 1ST FLOOR Riverside CA 92502-2205	2007 PROPERTY TAXES 32062 BAYWOOD STREET, LAKE ELSINORE, CA  Value: \$ 195,000.00					\$ 5,751.28	\$ 5,751.28
Account No:	   Value:						

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors  
 Holding Secured Claims

<b>Subtotal \$</b>	<b>\$ 340,557.62</b>	<b>\$ 145,557.62</b>
(Total of this page)		
<b>Total \$</b>	<b>\$ 435,465.46</b>	<b>\$ 235,465.46</b>
(Use only on last page)		

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)



In re SUZANNE, V. MOLINAR,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

**Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

**Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

**Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

**Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

**Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

**Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

**Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

**Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

**Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**No continuation sheets attached**

In re SUZANNE, V. MOLINAR,  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number <i>(See instructions above.)</i>	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 6576 Creditor # : 1 ALLSTATE PO BOX 650562 Dallas TX 75265-0562		2008 HOMEOWNERS INSURANCE				\$ 710.00
Account No: 1094 Creditor # : 2 BANK OF AMERICA P.O. BOX 15726 Wilmington DE 19886-5726		2007 Credit Card Purchases				\$ 7,013.00
Account No: 2270 Creditor # : 3 BANK OF AMERICA P.O. BOX 15726 Wilmington DE 19886-5726		2005 Credit Card Purchases				\$ 9,301.00
Account No: 3018 Creditor # : 4 BROTHERS TOWING 470 MAIN STREET Lake Elsinore CA 92530		2008 TOW & STORAGE CHARGES				\$ 2,000.00
<b>Subtotal \$</b>						<b>\$ 19,024.00</b>
<b>Total \$</b>						

2 continuation sheets attached

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re SUZANNE, V. MOLINAR

Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor H--Husband W--Wife J--Joint C--Community	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Amount of Claim			
			Contingent	Unliquidated	Disputed	
Account No: 8693 Creditor # : 5 CAPITAL ONE BANK P.O. BOX 60599 City of Industry CA 91716-0599		2007 Credit Card Purchases				\$ 998.00
Account No: 3661 Creditor # : 6 CHASE BANK USA P.O. BOX 94014 Palatine IL 60094-4014		2007 Credit Card Purchases				\$ 4,353.00
Account No: 3621 Creditor # : 7 DELL FINANCIAL SERVICES P.O. BOX 6403 Carol Stream IL 60197-6403		2008 Credit Card Purchases				\$ 2,570.00
Account No: 9046 Creditor # : 8 HFC P.O. BOX 60101 City of Industry CA 91716-0101		2007 LINE OF CREDIT				\$ 7,956.00
Account No: 8279 Creditor # : 9 KOHL'S P.O. BOX 30510 Los Angeles CA 90030-0510		2008 Credit Card Purchases				\$ 1,128.00
Account No: 0756 Creditor # : 10 ORANGE COUNTY HEALTHCARE AFFIL 1111 E. KATELLA VE. #100 Orange CA 92867		2006 PERSONAL LOAN				\$ 4,653.00

Sheet No. 1 of 2 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 21,658.00**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re SUZANNE, V. MOLINAR, Debtor(s)

Case No. \_\_\_\_\_ (if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number <i>(See instructions above.)</i>	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>5803</b> Creditor # : 11 PORTOFOLIO RECOVERY ASSOC C/O MALCOLM GERALD & ASSOCIATE 332 S. MICHIGAN AVE #600 Chicago IL 60604		2004 Credit Card Purchases				\$ 920.00
Account No: <b>5869</b> Creditor # : 12 US BANK P.O. BOX 790408 Saint Louis MO 63179-0408		2007 Credit Card Purchases				\$ 7,078.00
Account No: <b>0322</b> Creditor # : 13 WASHINGTON MUTUAL P.O. BOX 1097 Northridge CA 91328-1097		2007 Overdraft Charges				\$ 4,120.00
Account No: <b>0322</b> Representing: WASHINGTON MUTUAL		WEST ASSET MANAGEMENT P.O. BOX 201079 Stockton CA 95202-3026				
Account No: <b>5607</b> Creditor # : 14 WASHINGTON MUTUAL CARD SERVICE P.O. BOX 660487 Dallas TX 75266-0487		2006 Credit Card Purchases				\$ 14,093.00
Account No: <b>4968</b> Creditor # : 15 WASHINGTON MUTUAL CARD SERVICE P.O. BOX 660487 Dallas TX 75266-0487		2005 Credit Card Purchases				\$ 6,273.00

Sheet No. 2 of 2 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

<b>Subtotal \$</b>	<b>\$ 32,484.00</b>
<b>Total \$</b>	<b>\$ 73,166.00</b>

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

In re SUZANNE, V. MOLINAR / Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

In re SUZANNE, V. MOLINAR / Debtor

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

In re SUZANNE, V. MOLINAR,  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
<b>Single</b>	SON SON SON	9 13 2
<b>EMPLOYMENT:</b>		
	DEBTOR	SPOUSE
Occupation	<b>PAYROLL SUPERVISOR</b>	
Name of Employer	<b>MISSION HOSPITAL</b>	
How Long Employed	<b>4 YEARS</b>	
Address of Employer	<b>27700 MEDICAL CENTER RD. Mission Viejo CA 92691</b>	
<b>INCOME: (Estimate of average or projected monthly income at time case filed)</b>		
	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ 5,460.00	\$ 0.00
2. Estimate monthly overtime	\$ 0.00	\$ 0.00
3. SUBTOTAL	\$ 5,460.00	\$ 0.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ 440.00	\$ 0.00
b. Insurance	\$ 166.00	\$ 0.00
c. Union dues	\$ 0.00	\$ 0.00
d. Other (Specify):	\$ 0.00	\$ 0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 606.00	\$ 0.00
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 4,854.00	\$ 0.00
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ 0.00	\$ 0.00
8. Income from real property	\$ 0.00	\$ 0.00
9. Interest and dividends	\$ 0.00	\$ 0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
11. Social security or government assistance (Specify):	\$ 0.00	\$ 0.00
12. Pension or retirement income	\$ 0.00	\$ 0.00
13. Other monthly income (Specify):	\$ 0.00	\$ 0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 0.00	\$ 0.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ 4,854.00	\$ 0.00
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ 4,854.00	\$ 0.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re SUZANNE, V. MOLINAR,  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

### SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22 A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) .....	\$	2,599.50
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
2. Utilities: a. Electricity and heating fuel .....	\$	150.00
b. Water and sewer .....	\$	100.00
c. Telephone .....	\$	50.00
d. Other <b>CABLE TELEVISION</b> .....	\$	50.00
Other .....	\$	0.00
3. Home maintenance (repairs and upkeep) .....	\$	50.00
4. Food .....	\$	900.00
5. Clothing .....	\$	100.00
6. Laundry and dry cleaning .....	\$	40.00
7. Medical and dental expenses .....	\$	260.00
8. Transportation (not including car payments) .....	\$	500.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc. ....	\$	20.00
10. Charitable contributions .....	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's .....	\$	0.00
b. Life .....	\$	0.00
c. Health .....	\$	200.00
d. Auto .....	\$	200.00
e. Other .....	\$	0.00
Other .....	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage) (Specify) .....	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto .....	\$	281.33
b. Other: .....	\$	0.00
c. Other: .....	\$	0.00
14. Alimony, maintenance, and support paid to others .....	\$	0.00
15. Payments for support of additional dependents not living at your home .....	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement) .....	\$	0.00
17. Other: .....	\$	0.00
Other: .....	\$	0.00
18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,500.83
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 16 of Schedule I	\$	4,854.00
b. Average monthly expenses from Line 18 above	\$	5,500.83
c. Monthly net income (a. minus b.)	\$	(646.83)



In re SUZANNE, V. MOLINAR  
Debtor

Case No. \_\_\_\_\_  
(if known)

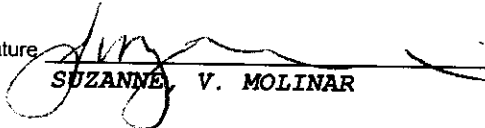
## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 16 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 11/20/2008

Signature

  
SUZANNE, V. MOLINAR

[If joint case, both spouses must sign.]

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

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

In re: **SUZANNE, V. MOLINAR**

Case No.

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor may also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

**1. Income from employment or operation of business**

None  State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<i>Year to date:</i> 55000	<i>WORK</i>
<i>Last Year:</i> 59031	<i>WORK</i>
<i>Year before:</i> 53673	<i>WORK</i>

**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

**3. Payments to creditors**

None  Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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None  b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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None  c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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**4. Suits and administrative proceedings, executions, garnishments and attachments**

None  a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

**5. Repossessions, foreclosures and returns**

None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

**6. Assignments and receiverships**

None  a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**7. Gifts**

None  List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**8. Losses**

None  List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**9. Payments related to debt counseling or bankruptcy**

None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<p><i>Payee: VICTOR V. VARTANIAN, ESQ. Address: 23193 LA CADENA, SUITE 101 LAGUNA HILLS, CA 92653</i></p>	<p><i>Date of Payment: Payor: SUZANNE, V. MOLINAR</i></p>	<p><i>\$1,200.00</i></p>

**10. Other transfers**

None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

---

**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

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**15. Prior address of debtor**

None  If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

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**16. Spouses and Former Spouses**

None  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

---

**17. Environmental Information**

None  For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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None  b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

---

None  c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

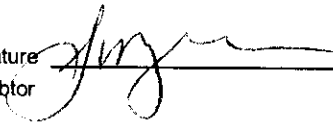
None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 11/20/2008

Signature   
of Debtor

Date \_\_\_\_\_

Signature \_\_\_\_\_  
of Joint Debtor  
(if any)

## UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA

In re **SUZANNE, V. MOLINAR**

Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
- I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
2006 TOYOTA CAMRY	AMERICREDIT	X			
32062 BAYWOOD STREET, LAKE ELSINORE, CA	EMC MORTGAGE CORP	X			
"	EMC MORTGAGE CORP	X			
"	COTTONWOOD CANYON HILLS COA	X			
"	RIVERSIDE COUNTY TREASURER	X			
"	RIVERSIDE COUNTY TREASURER	X			
"	RIVERSIDE COUNTY TREASURER	X			

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)

**Signature of Debtor(s)**

Date: 11/20/2008

Debtor: 

Date: \_\_\_\_\_

Joint Debtor: \_\_\_\_\_

## UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA

In re *SUZANNE, V. MOLINAR*

Case No.  
Chapter 7

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

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

For legal services, I have agreed to accept .....	\$	1,200.00
Prior to the filing of this statement I have received .....	\$	1,200.00
Balance Due .....	\$	0.00

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

- Debtor       Other (specify)

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

- Debtor       Other (specify)

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

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

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

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearing thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed].

**None**



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

**ANY AND ALL CONTESTED ISSUES**

### CERTIFICATION

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

11/20/2008

Date



Signature of Attorney

LAW OFFICES VICTOR V. VARTANIAN

Name of Law Firm

Attorney or Party Name, Address, Telephone and Fax Number, and CA State Bar No. <b>VICTOR V. VARTANIAN, ESQ.</b> <b>23193 LA CADENA, SUITE 101</b>  <b>LAGUNA HILLS, CA, 92653</b> <b>949 855-4200</b> <b>FAX: 949 855-4211</b> <b>Bar No: 64685</b>  <i>Attorney for Debtor</i>	<b>FOR COURT USE ONLY</b>
<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
In re <b>SUZANNE, V. MOLINAR</b>          <div style="text-align: right;">Debtor</div>	CHAPTER 7  CASE NUMBER  (No Hearing Required)

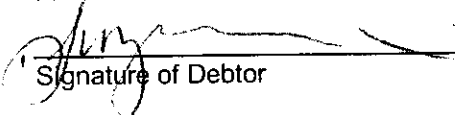
**DECLARATION RE: LIMITED SCOPE OF APPEARANCE  
PURSUANT TO LOCAL BANKRUPTCY RULE 2090-1**

TO THE COURT, THE DEBTOR, THE TRUSTEE (if any), AND THE UNITED STATES TRUSTEE:

1. I am the attorney for the Debtor in the above-captioned bankruptcy case.
2. On (specify date) 11/20/2008, I agreed with the Debtor that for a fee of \$1,200.00, I would provide only the following services:
  - a.  Prepare and file the Petition and Schedules
  - b.  Represent the Debtor at the 341(a) Meeting
  - c.  Represent the Debtor in any relief from stay actions
  - d.  Represent the Debtor in any proceeding involving an objection to Debtor's discharge pursuant to 11 U.S.C. § 727
  - e.  Represent the Debtor in any proceeding to determine whether a specific debt is nondischargable under 11 U.S.C. § 523
  - f.  Other (specify):
3. I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct and that this declaration was executed on the following date at the city set forth in the upper left-hand corner of this page.

Dated: 11/20/2008

I HEREBY APPROVE THE ABOVE

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

\_\_\_\_\_  
 Signature of Spouse

LAW OFFICES VICTOR V. VARTANIAN

Law Firm Name

By:   
 \_\_\_\_\_

Name: VICTOR V. VARTANIAN, ESQ.

\_\_\_\_\_  
 Attorney for Debtor

<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
In re <u>SUZANNE, V. MOLINAR</u>  <div style="text-align: right; font-size: small;">Debtor(s).</div>	CHAPTER: <u>7</u>  CASE NO.:

## DEBTOR'S CERTIFICATION OF EMPLOYMENT INCOME PURSUANT TO 11 U.S.C. § 521(a)(1)(B)(iv)

Please fill out the following blank(s) and check the box next to one of the following statements:

I, SUZANNE, V. MOLINAR, the debtor in this case, declare under penalty  
*(Print Name of Debtor)*

of perjury under the laws of the United States of America that:

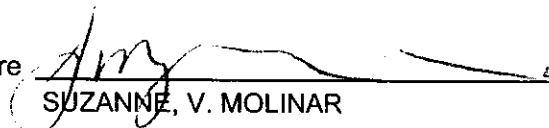
- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
*(NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.)*
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

I, \_\_\_\_\_, the debtor in this case, declare under penalty of  
*(Print Name of Joint Debtor, if any)*

perjury under the laws of the United States of America that:

- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
*(NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.)*
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

Date 11/20/2008

Signature   
SUZANNE, V. MOLINAR

Date 11/20/2008

Signature \_\_\_\_\_

Mission Hospital Reg Med Ctr  
 27700 Medical Center Road  
 Mission Viejo CA 92691  
 949/364-1400

Date  
 11/07/2008

Advice No.  
 188246

Deposit Amount: \$2,456.29

To The  
 Account(s) Of **SUZANNE V MOLINAR**  
 32062 Baywood St  
 Luke Elsinore, CA 92532

DIRECT DEPOSIT DISTRIBUTION		
Account Type	Account Number	Deposit Amount
Checking	XXXXXXXX0518	2,456.29
Total:		2,456.29

**NON-NEGOTIABLE**

Mission Hospital Reg Med Ctr  
 27700 Medical Center Road  
 Mission Viejo CA 92691

Pay Group: OEX-Exempt Employees	Business Unit: MHRMC
Pay Begin Date: 10/19/2008	Advice #: 00000000188246
Pay End Date: 11/01/2008	Advice Date: 11/07/2008

Suzanne V Molinar	Employee ID: 152732	TAX DATA: Federal	CA State
32062 Baywood St	Department: 8510-C01-Gen Acct	Marital Status: Married	Married
Lake Elsinore, CA 92532	Location: Mission Hospital Reg Med Ctr	Allowances: 99	99
	Job Title: Supv Payroll	Addl. Pct.:	
	Pay Rate: \$34.130000 Hourly	Addl. Amt.:	

HOURS AND EARNINGS					TAXES			
Description	Rate	Current		YTD		Description	Current	YTD
		Hrs/Unit	Earnings	Hrs/Unit	Earnings			
Paid Time Off CD1	34.13	8.00	273.04	88.08	2,797.61	Fed Withholding	0.00	0.00
Regular	34.13	80.00	2,730.40	1,758.01	\$6,080.31	Fed MED/RE	41.27	843.57
No Meal Break		0.00	0.00	1.00	26.39	Fed GASDI/EE	176.44	3,606.98
No Rest Period		0.00	0.00	1.00	26.39	CA Withholding	0.00	0.00
DT Premium		0.00	0.67	18.73	18.73	CA SDI/FTDI	22.74	464.88
Doubletime		0.00	0.67	18.73	18.73			
Premium Pay - Holiday@ 1.5		0.00	10.33	433.24	433.24			
Overtime		0.00	47.17	1,956.71	1,956.71			
Total:			3,003.44	61,358.11		Total:	240.47	4,915.43

BEFORE TAX DEDUCTIONS				AFTER TAX DEDUCTIONS				EMPLOYER PAID BENEFITS			
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
MHR Medical Premium	62.69	1,153.47	Supplemental Life	7.42	175.26	MHR Medical Premium	470.43	8,175.89			
MHR Dental Premium	19.30	335.40	Dependent Life Insurance	0.46	10.38	MHR Dental Premium	46.22	884.06			
MHR Vision Premium	5.49	80.19	Spouse Life Insurance	5.82	133.86	MHR Vision Premium	3.27	76.89			
Supplemental AD&D	6.92	159.16	Cafeteria	13.09	409.78	Basic Life Insurance	4.70	86.10			
401(k) Contribution	70.47	1,422.00	Miscellaneous HR	50.00	50.00	Basic Life Insurance*	1.85	33.30			
Health Care Reimbursement	64.62	1,486.16	Credit Union	0.00	489.00	Basic AD&D	11.69	14.17			
			Foundation	0.00	5.00	Long Term Disability	8.31	100.02			
			Marketing Sales	0.00	78.93	401(k) Contribution	35.24	711.08			
						401(a) Retirement Plan	105.70	2,133.02			
Total:		229.69	4,636.30	Total:		76.99	1,752.41	* Trouble			

TOTAL GROSS		FED TAXABLE GROSS		TOTAL TAXES		TOTAL DEDUCTIONS		NET PAY	
Current	YTD	Current	YTD	Current	YTD	Current	YTD	Current	YTD
3,003.44	61,358.11	2,775.60	56,795.03	240.47	4,915.43	306.68	6,188.79	2,456.29	50,053.89

PTO HOURS		LONG TERM SICK HOURS	
Current Period Earned	Current Period Earned	Current Period Earned	Current Period Earned
9.25	2.15	9.25	2.15
Start Balance: 0.04	Start Balance: 81.06	Start Balance: 0.04	Start Balance: 81.06
+ Earned: 198.81	+ Earned: 47.30	+ Earned: 198.81	+ Earned: 47.30
- Taken: 73.00	- Taken: 73.00	- Taken: 73.00	- Taken: 73.00
+ Adjustments:	+ Adjustments:	+ Adjustments:	+ Adjustments:
End Balance: 125.85	End Balance: 128.44	End Balance: 125.85	End Balance: 128.44

MESSAGE:

*Handwritten notes:*  
 MHR Medical Premium  
 MHR Dental Premium  
 MHR Vision Premium

Mission Hospital Reg Med Ctr  
27700 Medical Center Road  
Mission Viejo CA 92691  
949/364-1400

Date  
10/24/2008

Advice No.  
186426

Deposit Amount: \$2,252.69

To The  
Account(s) Of **SUZANNE V MOLINAR**  
32062 Baywood St  
Lake Elsinore, CA 92532

DIRECT DEPOSIT DISTRIBUTION		
Account Type	Account Number	Deposit Amount
Checking	XXXXXX0518	2,252.69
<b>Total:</b>		<b>2,252.69</b>

**NON-NEGOTIABLE**

Mission Hospital Reg Med Ctr  
17700 Medical Center Road  
Mission Viejo CA 92691

Pay Group: OEX-Exempt Employees      Business Unit: MHRMC  
Pay Begin Date: 10/03/2008      Advice #: 00000000186426  
Pay End Date: 10/18/2008      Advice Date: 10/24/2008

Suzanne V Molinar 32062 Baywood St Lake Elsinore, CA 92532	Employee ID: 152732	TAX DATA: Federal CA State
	Department: 8510-C01-Gen Acct	Marital Status: Married Married
	Location: Mission Hospital Reg Med Ctr	Allowances: 99 99
	Job Title: Sops Payroll	Advt. Pct.:
	Pay Rate: 534.130000 Hourly	Advt. Amt.:

HOURS AND EARNINGS						TAXES		
Description	Rate	Current		YTD		Description	Current	YTD
		Hrs/Unit	Earnings	Hrs/Unit	Earnings			
Paid Time Off C01	34.13	2.00	273.04	80.00	2,524.57	Fed Withholding	0.00	0.00
Regular	34.13	72.00	2,457.36	1,678.01	53,349.91	Fed MED/VEE	37.31	802.30
No Meal Break			0.00	1.00	26.39	Fed DAD/VEE	159.53	3,430.52
No Rest Period			0.00	1.00	26.39	CA Withholding	0.00	0.00
DT Premium			0.00	0.67	18.73	CA SDI FTDI	20.53	442.14
Doubletime			0.00	0.67	18.73			
Premium Pay - Holiday@ 1.5			0.00	10.33	433.24			
Overtime			0.00	47.17	1,956.71			
<b>Total:</b>			<b>2,730.40</b>		<b>58,354.67</b>	<b>Total:</b>	<b>217.39</b>	<b>4,674.96</b>

BEFORE-TAX DEDUCTIONS				AFTER-TAX DEDUCTIONS				EMPLOYER-PAID BENEFITS			
Description	Current	YTD		Description	Current	YTD		Description	Current	YTD	
MHR Medical Premium	62.69	1,990.78		Supplemental Life	7.62	167.64		MHR Medical Premium	470.43	8,305.46	
MHR Dental Premium	19.30	316.10		Dependent Life Insurance	0.46	10.12		MHR Dental Premium	46.22	841.84	
MHR Vision Premium	5.69	74.50		Spouse Life Insurance	5.82	128.04		MHR Vision Premium	3.27	73.62	
Supplemental AD&D	6.92	152.24		Cafeteria	22.10	796.69		Basic Life Insurance	4.28	81.90	
401(k) Contribution	65.01	1,351.53		Credit Union	0.00	489.00		Basic Life Insurance*	1.85	31.45	
Health Care Reimbursement	64.61	1,421.54		Foundation	0.00	5.00		Basic AD&D	0.69	13.48	
				Marketing Sales	0.00	78.93		Long Term Disability	0.33	171.69	
								401(k) Contribution	32.51	675.84	
								401(a) Retirement Plan	97.51	2,027.32	
<b>Total:</b>	<b>224.12</b>	<b>4,406.69</b>		<b>Total:</b>	<b>36.10</b>	<b>1,675.42</b>		<b>Total:</b>	<b>1,082.11</b>	<b>47,597.60</b>	

TOTAL GROSS		FED-TAXABLE GROSS		TOTAL TAXES		TOTAL DEDUCTIONS		NET PAY	
Current:	2,730.40		2,508.03	217.39		260.32		2,252.69	
YTD:	58,354.67		53,979.43	4,674.96		6,082.11		47,597.60	

PTO HOURS		LONG-TERM SICK HOURS	
YTD	YTD	YTD	YTD
Current Period Earned	9.25	Current Period Earned	2.15
Start Balance:	0.84	Start Balance:	81.06
+ Earned:	189.56	+ Earned:	45.23
- Taken:	65.00	- Taken:	
+ Adjustments:		+ Adjustments:	
End Balance:	124.60	End Balance:	126.28

NET PAY DISTRIBUTION	
Advice #00000000186426	2,252.69
<b>Total:</b>	<b>2,252.69</b>

MESSAGE:

In re SUZANNE, V. MOLINAR  
Debtor(s)

Case Number: \_\_\_\_\_  
(If known)

According to the calculations required by this statement:  
 The presumption arises.  
 The presumption does not arise.  
 (Check the box as directed in Parts I, III, and VI of this statement.)

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

<b>Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS</b>	
1A	If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  <input type="checkbox"/> <b>Veteran's Declaration.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).
1B	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  <input type="checkbox"/> <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.

<b>Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION</b>												
		<b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed. a. <input type="checkbox"/> <b>Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</b> b. <input type="checkbox"/> <b>Married, not filing jointly, with declaration of separate households.</b> By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b> c. <input checked="" type="checkbox"/> <b>Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b> d. <input type="checkbox"/> <b>Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b>										
		All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the result on the appropriate line.	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%; text-align: center; border: none;"><b>Column A</b></td> <td style="width: 25%; text-align: center; border: none;"><b>Column B</b></td> </tr> <tr> <td></td> <td style="text-align: center; border: none;"><b>Debtor's Income</b></td> <td style="text-align: center; border: none;"><b>Spouse's Income</b></td> </tr> </table>		<b>Column A</b>	<b>Column B</b>		<b>Debtor's Income</b>	<b>Spouse's Income</b>			
	<b>Column A</b>	<b>Column B</b>										
	<b>Debtor's Income</b>	<b>Spouse's Income</b>										
3	<b>Gross wages, salary, tips, bonuses, overtime, commissions.</b>	\$6,138.00	\$0.00									
4	<b>Income from the operation of a business, profession, or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">Gross receipts</td> <td style="width: 30%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Business income</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	c.	Business income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary business expenses	\$0.00										
c.	Business income	Subtract Line b from Line a										
5	<b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">Gross receipts</td> <td style="width: 30%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary operating expenses</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Rent and other real property income</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	c.	Rent and other real property income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary operating expenses	\$0.00										
c.	Rent and other real property income	Subtract Line b from Line a										
6	<b>Interest, dividends, and royalties.</b>	\$0.00	\$0.00									

7	<b>Pension and retirement income.</b>	\$0.00	\$0.00						
8	<b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is icompleted.	\$0.00	\$0.00						
9	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1" style="width:100%; margin-top: 5px;"> <tr> <td style="width:35%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width:30%;">Debtor <u>\$0.00</u></td> <td style="width:35%;">Spouse <u>\$0.00</u></td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor <u>\$0.00</u>	Spouse <u>\$0.00</u>	\$0.00	\$0.00			
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor <u>\$0.00</u>	Spouse <u>\$0.00</u>							
10	<b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. <b>Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance.</b> Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. <table border="1" style="width:100%; margin-top: 5px;"> <tr> <td style="width:5%;">a.</td> <td style="width:65%;"></td> <td style="width:30%; text-align:right;">0</td> </tr> <tr> <td>b.</td> <td></td> <td style="text-align:right;">0</td> </tr> </table> <p>Total and enter on Line 10</p>	a.		0	b.		0	\$0.00	\$0.00
a.		0							
b.		0							
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$6,138.00	\$0.00						
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$6,138.00							

**Part III. APPLICATION OF § 707(b)(7) EXCLUSION**

13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$73,656.00
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>CALIFORNIA</u> b. Enter debtor's household size: <u>5</u>	\$83,914.00
15	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. <input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.	

**Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).**

**Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)**

16	Enter the amount from Line 12.	\$									
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. <table border="1" style="width:100%; margin-top: 5px;"> <tr> <td style="width:5%;">a.</td> <td style="width:65%;"></td> <td style="width:30%; text-align:right;">\$</td> </tr> <tr> <td>b.</td> <td></td> <td style="text-align:right;">\$</td> </tr> <tr> <td>c.</td> <td></td> <td style="text-align:right;">\$</td> </tr> </table> <p>Total and enter on Line 17</p>	a.		\$	b.		\$	c.		\$	\$
a.		\$									
b.		\$									
c.		\$									

18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$
----	---	----

**Part V. CALCULATION OF DEDUCTIONS FROM INCOME**

**Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

19A	<p><b>National Standards: food, clothing, and other items.</b> Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$																
19B	<p><b>National Standards: health care.</b> Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="2" style="text-align:left;">Household members under 65 years of age</th> <th colspan="2" style="text-align:left;">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width:5%;">a1.</td> <td style="width:75%;">Allowance per member</td> <td style="width:5%;">a2.</td> <td style="width:15%;">Allowance per member</td> </tr> <tr> <td>b1.</td> <td>Number of members</td> <td>b2.</td> <td>Number of members</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td>c2.</td> <td>Subtotal</td> </tr> </tbody> </table>	Household members under 65 years of age		Household members 65 years of age or older		a1.	Allowance per member	a2.	Allowance per member	b1.	Number of members	b2.	Number of members	c1.	Subtotal	c2.	Subtotal	\$
Household members under 65 years of age		Household members 65 years of age or older																
a1.	Allowance per member	a2.	Allowance per member															
b1.	Number of members	b2.	Number of members															
c1.	Subtotal	c2.	Subtotal															
20A	<p><b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$																
20B	<p><b>Local Standards: housing and utilities; mortgage/rent expenses.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <tbody> <tr> <td style="width:5%;">a.</td> <td style="width:75%;">IRS Housing and Utilities Standards; mortgage/rental expense</td> <td style="width:15%;">\$</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td>Subtract Line b from Line a.</td> </tr> </tbody> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$							
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$																
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$																
c.	Net mortgage/rental expense	Subtract Line b from Line a.																
21	<p><b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> <div style="border: 1px solid black; height: 50px; margin-top: 10px;"></div>	\$																
22A	<p><b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  <input checked="" type="checkbox"/> 0   <input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation.                  If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$																
22B	<p><b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$																



23	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width:5%; text-align:center;">a.</td> <td style="width:55%;">IRS Transportation Standards, Ownership Costs</td> <td style="width:15%; text-align:right;">\$</td> <td style="width:25%;"></td> </tr> <tr> <td style="text-align:center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td style="text-align:right;">\$</td> <td style="vertical-align:bottom;">\$</td> </tr> <tr> <td style="text-align:center;">c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td colspan="2">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$		b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	\$	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.		\$
a.	IRS Transportation Standards, Ownership Costs	\$												
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	\$											
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.												
24	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width:5%; text-align:center;">a.</td> <td style="width:55%;">IRS Transportation Standards, Ownership Costs</td> <td style="width:15%; text-align:right;">\$</td> <td style="width:25%;"></td> </tr> <tr> <td style="text-align:center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td style="text-align:right;">\$</td> <td style="vertical-align:bottom;">\$</td> </tr> <tr> <td style="text-align:center;">c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td colspan="2">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$		b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	\$	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.		\$
a.	IRS Transportation Standards, Ownership Costs	\$												
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	\$											
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.												
25	<p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b></p>													
26	<p><b>Other Necessary Expenses: mandatory payroll deductions for employment.</b> Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b></p>	\$												
27	<p><b>Other Necessary Expenses: life insurance.</b> Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b></p>	\$												
28	<p><b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due support obligations included in Line 44.</b></p>	\$												
29	<p><b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>	\$												
30	<p><b>Other Necessary Expenses: childcare.</b> Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b></p>	\$												
31	<p><b>Other Necessary Expenses: health care.</b> Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not include payments for health insurance or health savings accounts listed in Line 34.</b></p>	\$												
32	<p><b>Other Necessary Expenses: telecommunication services.</b> Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service -- such as pagers, call waiting, caller id, special long distance, or internet service -- to the extent necessary for your health and welfare or that of your dependents. <b>Do not include any amount previously deducted.</b></p>	\$												
33	<p><b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32</p>	\$												

**Subpart B: Additional Living Expense Deductions**

**Note: Do not include any expenses that you have listed in Lines 19-32**

34	<p><b>Health Insurance, Disability Insurance and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%; text-align: center;">a.</td> <td style="width:70%;">Health Insurance</td> <td style="width:25%;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Disability Insurance</td> <td>\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Health Savings Account</td> <td>\$</td> </tr> </table> <p>Total and enter on Line 34</p> <p>If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ _____</p>	a.	Health Insurance	\$	b.	Disability Insurance	\$	c.	Health Savings Account	\$	\$
a.	Health Insurance	\$									
b.	Disability Insurance	\$									
c.	Health Savings Account	\$									
35	<p><b>Continued contributions to the care of household or family members.</b> Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.</p>	\$									
36	<p><b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.</p>	\$									
37	<p><b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. <b>You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that reasonable and necessary and not already accounted for in the IRS Standards.</b></p>	\$									
38	<p><b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b></p>	\$									
39	<p><b>Additional food and clothing expense.</b> Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must demonstrate that the additional amount claimed is reasonable and necessary.</b></p>	\$									
40	<p><b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).</p>	\$									
41	<p><b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40</p>	\$									

**Subpart C: Deductions for Debt Payment**

42	<p><b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;"></th> <th style="width:25%;">Name of Creditor</th> <th style="width:25%;">Property Securing the Debt</th> <th style="width:15%;">Average Monthly Payment</th> <th style="width:30%;">Does payment include taxes or insurance?</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td style="text-align: center;">d.</td> <td></td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td style="text-align: center;">e.</td> <td></td> <td></td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td colspan="3"></td> <td colspan="2" style="text-align: center;">Total: Add Lines a - e</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	a.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	b.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	c.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	d.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	e.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no				Total: Add Lines a - e		\$
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?																																	
a.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																																	
b.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																																	
c.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																																	
d.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																																	
e.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																																	
			Total: Add Lines a - e																																		

**43 Other payments on secured claims.** If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.

	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount
a.			\$
b.			\$
c.			\$
d.			\$
e.			\$
			Total: Add Lines a - e

\$

**44 Payments on prepetition priority claims.** Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. **Do not include current obligations, such as those set out in Line 28.**

\$

**45 Chapter 13 administrative expenses.** If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.

a.	Projected average monthly Chapter 13 plan payment.	\$
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b

\$

**46 Total Deductions for Debt Payment.** Enter the total of Lines 42 through 45.

\$

**Subpart D: Total Deductions from Income**

**47 Total of all deductions allowed under § 707(b)(2).** Enter the total of Lines 33, 41, and 46.

\$

**Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION**

**48 Enter the amount from Line 18 (Current monthly income for § 707(b)(2))**

\$

**49 Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))**

\$

**50 Monthly disposable income under § 707(b)(2).** Subtract Line 49 from Line 48 and enter the result

\$

**51 60-month disposable income under § 707(b)(2).** Multiply the amount in Line 50 by the number 60 and enter the result.

\$

**52 Initial presumption determination.** Check the applicable box and proceed as directed.

**The amount on Line 51 is less than \$6,575** Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.

**The amount set forth on Line 51 is more than \$10,950.** Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.

**The amount on Line 51 is at least \$6,575, but not more than \$10,950.** Complete the remainder of Part VI (Lines 53 through 55).

**53 Enter the amount of your total non-priority unsecured debt**

\$

**54 Threshold debt payment amount.** Multiply the amount in Line 53 by the number 0.25 and enter the result.

\$

**55 Secondary presumption determination.** Check the applicable box and proceed as directed.

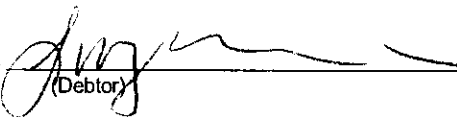
**The amount on Line 51 is less than the amount on Line 54.** Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.

**The amount on Line 51 is equal to or greater than the amount on Line 54.** Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.

**PART VII. ADDITIONAL EXPENSE CLAIMS**

56	<p><b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p>		
		Expense Description	Monthly Amount
	a.		\$
	b.		\$
	c.		\$
Total: Add Lines a, b, and c		\$	

**Part VIII: VERIFICATION**

57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i></p>	
	Date: 11/20/2008	Signature:  (Debtor)
	Date: 11/20/2008	Signature: _____ (Joint Debtor, if any)

# MASTER MAILING LIST Verification Pursuant to Local Rule 1007-2(d)

Name VICTOR V. VARTANIAN, ESQ.

Address 23193 LA CADENA, SUITE 101 LAGUNA HILLS, CA 92653

Telephone 949 855-4200

- Attorney for Debtor(s)
- Debtor In Pro Per


<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
List all names including trade names, used by Debtor(s) within last 8 years: <i>In re SUZANNE, V. MOLINAR</i>	Case No. <hr/> Chapter 7

## VERIFICATION OF CREDITOR MAILING LIST

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 3 sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Rule 1007-2(d) and I/we assume all responsibility for errors and omissions.

Date: 11/20/2008

  
 Attorney: VICTOR V. VARTANIAN, ESQ.

  
 Debtor: SUZANNE, V. MOLINAR  
 Joint Debtor: \_\_\_\_\_

SUZANNE V MOLINAR  
32062 BAYWOOD ST  
Lake Elsinore CA 92532

VICTOR V VARTANIAN ESQ  
23193 LA CADENA SUITE 101  
LAGUNA HILLS CA 92653

ALLSTATE  
PO BOX 650562  
Dallas TX 75265-0562

AMERICREDIT  
P O BOX 78143  
Phoenix AZ 85062-8143

BANK OF AMERICA  
P O BOX 15726  
Wilmington DE 19886-5726

BROTHERS TOWING  
470 MAIN STREET  
Lake Elsinore CA 92530

CAPITAL ONE BANK  
P O BOX 60599  
City of Industry CA 91716-0599

CHASE BANK USA  
P O BOX 94014  
Palatine IL 60094-4014

COTTONWOOD CANYON HILLS COA  
C/O ACTION PROPERTY MANAGEMENT  
P O BOX 25012  
Santa Ana CA 92799-5012

DELL FINANCIAL SERVICES  
P O BOX 6403  
Carol Stream IL 60197-6403

DOLINKA GROUP  
P O BOX 12677  
Newport Beach CA 92658-8073

EMC MORTGAGE CORP  
P O BOX 619063  
Dallas TX 75261

HFC  
P O BOX 60101  
City of Industry CA 91716-0101

KOHL'S  
P O BOX 30510  
Los Angeles CA 90030-0510

ORANGE COUNTY HEALTHCARE AFFIL  
1111 E KATELLA VE #100  
Orange CA 92867

PORTOFOLIO RECOVERY ASSOC  
C/O MALCOLM GERALD & ASSOCIATE  
332 S MICHIGAN AVE #600  
Chicago IL 60604

RIVERSIDE COUNTY TREASURER  
4080 LEMON STR 1ST FLOOR  
Riverside CA 92502-2205

US BANK  
P O BOX 790408  
Saint Louis MO 63179-0408

WASHINGTON MUTUAL  
P O BOX 1097  
Northridge CA 91328-1097

WASHINGTON MUTUAL CARD SERVICE  
P O BOX 660487  
Dallas TX 75266-0487

WEST ASSET MANAGEMENT  
P O BOX 201079  
Stockton CA 95202-3026