Case 13-32436-KCF Doc 1 Filed 10/13/13 Entered 10/13/13 11:37:52 Desc Main_{10/13/13 11:35AM} Document Page 1 of 49

31	(Official	Form	1)(04/1)	3)

	ourt				Volu	intary Petition		
Name of Debtor (if individual, enter Last, First, Wolf, Shara M.	Name	of Joint De	ebtor (Spouse) (Last, First,	Middle):			
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	3 years		All Otl (includ	ner Names le married,	used by the J maiden, and	loint Debtor i trade names)	n the last 8 y	years
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-5936	yer I.D. (ITIN)/Comple	ete EIN		ur digits of than one, state		Individual-T	axpayer I.D	. (ITIN) No./Complete Ell
Street Address of Debtor (No. and Street, City, a 29 Southwind Circle Jackson, NJ	,	ZIP Code	Street	Address of	Joint Debtor	(No. and Stro	eet, City, and	d State): ZIP Code
County of Residence or of the Principal Place of		527	County	of Reside	ence or of the	Principal Pla	ce of Busine	ess:
Ocean			-					
Mailing Address of Debtor (if different from stre	et address):		Mailin	g Address	of Joint Debt	or (if differen	t from stree	t address):
		ZIP Code	-					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):								I
Type of Debtor (Form of Organization) (Check one box)	Nature of I (Check or					of Bankrup		
 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.) 	 Health Care Busin Single Asset Real in 11 U.S.C. § 101 Railroad Stockbroker Commodity Broke Clearing Bank 	ess Estate as def I (51B)	fined	Chapte Chapte Chapte Chapte Chapte	er 7 er 9 er 11 er 12	of : □ Ch	apter 15 Pet a Foreign M apter 15 Pet	tition for Recognition lain Proceeding tition for Recognition onmain Proceeding
Chapter 15 Debtors	Other Tax-Exem	of Entity				Nature of Debts (Check one box)		
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box, if ☐ Debtor is a tax-exem under Title 26 of the Code (the Internal R	applicable) pt organizatio United States		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."				
Filing Fee (Check one box)	Check one Debt		x: Chapter 11 Debtors is a small business debtor as defined in 11 U.S.C. § 101(51D).				
 Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's considerati debtor is unable to pay fee except in installments. I Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration) 	on certifying that the Rule 1006(b). See Official 7 individuals only). Must	or is not or's aggr ess than \$ pplicable an is bein ptances o	a small busin egate nonco 2,490,925 (a boxes: g filed with of the plan w	ness debtor as o ntingent liquida <i>amount subject</i> this petition.	lefined in 11 U ated debts (excl	S.C. § 101(5 uding debts o on 4/01/16 an		
Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. THIS SPACE IS FOR COURT USE ONLY Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. THIS SPACE IS FOR COURT USE ONLY						DR COURT USE ONLY		
1- 50- 100- 200-		0,001- 25,	,001- ,000	□ 50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	to \$10 to \$50 to	50,000,001 \$10 \$100 to \$	00,000,001 \$500 lion	\$500,000,001 to \$1 billion				
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Case 13-32436-KCF	Doc 1	Filed 10/13/1	.3 Entered 10/13/13 11:37:52	Desc Main,10/13/13 11:35AM
		Document	Page 2 of 49	

B1 (Official For	m 1)(04/13) Document	Page 2 of 49	Page 2			
Voluntar	y Petition	Name of Debtor(s):				
	✓ ust be completed and filed in every case)	Wolf, Shara M.				
(1nis page mi	All Prior Bankruptcy Cases Filed Within Las	t 8 Vears (If more than two attach ad	ditional sheet)			
Location	An Thor Bankruptey Cuses Theu Whinn Eas	Case Number:	Date Filed:			
Where Filed:	- None -					
Location Where Filed:		Case Number:	Date Filed:			
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)			
Name of Debt - None -	oor:	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
	Exhibit A		hibit B whose debts are primarily consumer debts.)			
(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.) (To be completed if debtor is an individual whole debt is an						
🛛 Exhibit	A is attached and made a part of this petition.	X /s/ David A. Semanchik Signature of Attorney for Debtor(s) David A. Semanchik	October 13, 2013 (Date)			
	Fvł	l nibit C				
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	harm to public health or safety?			
-	leted by every individual debtor. If a joint petition is filed, ea		separate Exhibit D.)			
	D completed and signed by the debtor is attached and made	a part of this petition.				
If this is a join \Box Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition				
	Information Regardin	-				
	(Check any ap Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or principal asset				
	There is a bankruptcy case concerning debtor's affiliate, g	• •	•			
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or th sought in this District.	s in the United States but is a defendant	nt in an action or			
	Certification by a Debtor Who Reside (Check all app		ty			
	Landlord has a judgment against the debtor for possession		complete the following.)			
	(Name of landlord that obtained judgment)					
	(Address of landlord)					
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment	here are circumstances under which th for possession, after the judgment for	e debtor would be permitted to cure possession was entered, and			
	Debtor has included with this petition the deposit with the after the filing of the petition.					

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

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Voluntary returns Wolf, Shara M. Chis page must be completed and filed in every case) Signatures Signatures Signatures Signatures Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this periton is ner and correct, that I and the foreign representative of a debor in a for proceed under chapter 7. II, 12, or 13 of title 11, United States Code, understand the relation of the foreign and that and autorated on file dits petiton. (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh no.) (Check and y mesh no.) Check and y mesh perimetry is an and perimetry is an and perimetry is an and perimetry in the peri	L (Official Form 1)(04/13) Document	Page 3 of 49 Page
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Irrequest relief in accordance with the chapter of tilte 11, United States Code, specified in this petition, sp	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 tile 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the	 (Check only one box.) ☐ I request relief in accordance with chapter 15 of title 11. United States Coc Certified copies of the documents required by 11 U.S.C. §1515 are attached
Signature of Joint Debtor Signature of Joint Debtor October 13, 2013 Date Signature of Attorney and the notices and information required under 11 U.S. C. \$ 110, 12 prepared the debtor with a crypt of this document of the notices and information required under 11 U.S. C. \$ 110, 12 prepared the debtor with a crypt of this document of the notices and information required under 11 U.S. C. \$ 110, 12 prepared the debtor with a crypt of this document of the notices and information required under 11 U.S. C. \$ 110, 12 prepared the debtor with a crypt of this document of the notices and information required under 11 U.S. C. \$ 110, 12 prepared the debtor with a crypt of the debtor, as required in that section. Date Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Printed Name of Attorney for Debtor(s) Address Email: info@semanchiklaw.com T32 240 4055 Fax: T32 240 3011 Telephone Number Telephone Number Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information in the schedules is incorret. Nate Signature of Authorized Individual The create and creater, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition repared to fi		of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
Signature of Debtor Shara M. Worr Signature of Joint Debtor Telephone Number (If not represented by attorney) October 13, 2013 Date Signature of Attorney and the notices and dependence of the notices and another provide the solution or equired under 11 U.S. C. 8 110 (2). 1 prepared this document for compensation and have provided the debtor with a copy of this document for Compensation and have provided the debtor with a copy of this document for filing for a provide the debtor or each prepare as defined the debtor, as required in that section. Market Signature of Attorney for Debtor(s) Date Datie Attorney for Debtor(s) Date Address Printed Name of Attorney petition Preparer is and another provide and the section. Toms River, NJ 08753 Date Telephone Number Email: info@semanchiklaw.com T32 240 4055 Fax: T32 240 3011 Telephone Number Telephone Number Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information in the schedules in the corporation/Partnership) Address I declare under penalty of perjury that the information in the schedules in the corporation/Partnership) Date Signature of Authorized Individual Time of Authorized Individual Printed Name of Authorized Individual If more than one person prepared this document, attach additional sheet c	🗴 /s/ Shara M. Wolf	
Signature of Joint Debtor Telephone Number (If not represented by attorney) October 13, 2013 Date Signature of Attorney & Mither Provide the debtor as the component of a defined in 11 U.S.C. § 1010, 21 preparent dift document for the debtor and the provided the debtor with a corp of the debtor and the provided the debtor with a corp of the debtor and the provided the debtor with a corp of the debtor and the notices and information required under 11 U.S.C. § 1010, 21 preparent dift document for filling for a debtor services of the maximum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a transmum amount before preparing any document for filling for a mindividual, state the Social Security number of the officer, for the debtor acception preparer is no an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer is no an individual state the Social Security number of the officer, principal, responsible person or partner whore Social Security number is provided above. Tate efforted in the storemet in the comperation of partner whore Social Security number is provided above. Nume and docial Security number is provided above. Tate conserver, and that have been authorized to file this petition is true and correct, and that have been authorized to file this petition.	Signature of Debtor Shara M. Wolf	Signature of Foreign Representative
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Telephone Number (If not represented by attorney) October 13, 2013 Date Signature of Attorney* (d) Case penalty of penity that (1) I an a bankruptcy petition prepares a difficult in II U.S.C. § 110(b), estima a bankruptcy of this document on the actions and have provided the debtor with a copy of this document on the actions and information required under 11 U.S.C. § 110(b), estima amanum feed reperavers, a difficult on the actions and information requiring any document for filing for a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification the actions as nonvolved at ear an inquiry that the information provided in this petition. Yate and correct, and that I have been autorized on file this petition is true and correct, and that I have been autorized on file this petition. Yate of Autorized Individual Printed Name of Autorized Individual Theore Avec. Torons River, NJ 08753 Address Email: info@semanchikklaw.com Tate phone Number October 13, 2013 Date Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition. Signature of Autorized Individual The of Autorized Individual	Signature of Joint Debtor	Timed Name of Foleign Representative
October 13, 2013 Date Signature of Attorney* (Jel David A. Semanchik Signature of Attorney for Debtor(s) Date Date Signature of Attorney for Debtor(s) Law Office of David A. Semanchik Firm Name Time Attorney for Debtor(s) Law Office of David A. Semanchik Firm Name Table Office of David A. Semanchik Firm Name Table Opper Ave. Toms River, NJ 08753 Brail: info@semanchiklaw.com 732 240 4055 Fax: 732 240 3011 Telephone Number October 13, 2013 Date Signature of Autorized Individual The debtor accella se under penalty of perjury that the information provided in this petition or the abart of the oblor. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition or the apter of title 11, United States Code, specified in this petition or the parter is the onterparter's filter to acception and featority numbers of all other individual The debtor requests relife in accordance with the chapter of title 11, United States Code, specified in this petition or the appropriate official form for each person. Signature of Authorized I		Date
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Date Indee penalty of periory that: (1) I and a backupty petition Signature of Attorney* Indee penalty of periory that: (1) I and a backupty petition X /s/ David A. Semanchik Signature of Attorney for Debtor(s) David A. Semanchik Drinted Name of Attorney for Debtor(s) David A. Semanchik Law Office of David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Printed Name and title, if any, of Bankruptcy Petition preparer is no an individual, state the Social Security number of the officer, principal, responsible person or patter of the bankrupcy petition preparer is no an individual, state the Social Security number of the officer, principal, responsible person or patter of the bankrupcy petition preparer or officer, principal, responsible person or patter of the bankrupcy petition preparer or officer, principal, responsible person or patter whose Social Security number of all other individual shoe prepare assisted in social-Security numbers of all other individual shoe prepare stress of the debtor. Y Signature of Authorized Individual The debtor requests relating in this petition nor each person. Signature of Authorized Individual Y Signature of Authorized Individual Y Date Signatur	October 12, 2012	Signature of Non-Attorney Bankrupicy retition rreparer
Signature of Attorney* Signature of Attorney* (1/2) / David A. Semanchik Signature of Attorney for Debtor(s) David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Firm Name 1130 Hooper Ave. Toms River, NJ 08753 Address Signature of Debtor(s) Email: info@semanchiklaw.com 732 240 4055 Fax: 732 240 3011 Telephone Number October 13, 2013 Date *n a case in which § 7070b(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information provided in this petition or the authorized to file this petition or peparer or officer, principal, responsible person or partner of officer, principal, responsible person: preparer or officer, principal, responsible per		I declare under penalty of perjury that: (1) I am a bankruptcy petition
Image: Signature of Automey for Debtor(s) Javid A. Semanchik Signature of Automey for Debtor(s) Javid A. Semanchik Printed Name of Automey for Debtor(s) Law Office of David A. Semanchik Firm Name 1130 Hooper Ave. Toms River, NJ 08753 Address Scial-Security number (If the bankruptcy petition preparer). (Required by 11 U.S.C. § 110.) 732 240 4055 Fax: 732 240 3011 Telephone Number October 13, 2013 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information is three adcorrect, and that 1 have been authorized to file this petition on behalf of the debtor. I declare under penalty of perjury that the information provided in this petition is inceract. Y I declare under genalty of perjury that the information provided in this petition is inceract. Signature of Authorized Individual Y I' more than one person prepared this document, attach additional sheet conforming to the appropriate official form for each person. Address The debtor request relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Authorized Individual <		compensation and have provided the debtor with a copy of this document
/s/ David A. Semanchik Signature of Attorney for Debtor(s) David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Firm Name 1130 Hooper Ave. Toms River, NJ 08753 Address Social-Security number (If the bankruptcy Petition preparer is not an individual, state the Social Security number of the officer. Address Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer. Printed Name and title, if any, of Bankruptcy petition preparer is not an individual, state the Social Security number of the officer. Printed Name of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Authorized Individual Printed Name of Authorized Individual Thate of Authorized Individual Thate of Authorized Individual Printed Name of Authori	Signature of Attorney	
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David A. Semanchik Printed Name of Attorney for Debtor(s) Law Office of David A. Semanchik Firm Name 1130 Hooper Ave. Toms River, NJ 08753 Address Scial-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.) Totate Yin a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the atomey has no knowledge after an inquiry that the information provided in this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition is true and correct, and that 1 have been authorized to file this petition. Signature of Authorized Individual If more than one person prepared this document, attach additional sheet conforming to the appropriate official form for each person. Names and Social-Security numbers of file disport If more than one person prepared this document, attach additional sheet conforming to the appropriate official form for each person. Names and Social-Security numbers of file t		of the maximum amount before preparing any document for filing for a
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Firm Name 1130 Hooper Ave. Toms River, NJ 08753 Address Email: info@semanchiklaw.com 732 240 4055 Fax: 732 240 3011 Telephone Number October 13, 2013 Date **In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United Signature of Authorized Individual Frinted Name of Authorized Individual Title of Authorized Individual Title of Authorized Individual	Printed Name of Attorney for Debtor(s)	Official Form 19 is attached.
Finite Value 1130 Hoopper Ave. Toms River, NJ 08753 Address Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible persons or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.) Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible persons or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.) Address Matter Social Security number (If the bankruptcy petition preparer or officer, principal, responsible persons) or partner of the bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. V Date Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual		Printed Name and title if any of Bankruntcy Petition Prenarer
Toms River, NJ 08753 Social-Security number (If the bankrutpcy petition preparer is no an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.) Address Email: info@semanchiklaw.com 732 240 4055 Fax: 732 240 3011 Address Telephone Number October 13, 2013 Date Address *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. Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Signature of Authorized Individual The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. If more than one person prepared this document, attach additional sheet conforming to the appropriate official form for each person. V Abankruptcy petition preparer's failure to comply with the provisions of title 11 additional the Federal Rules of Bankruptcy Proceed the general Rules of Dankruptcy Prevision at the He addite Rules of Dankruptcy Previsions of title 11 and the Federal Rules of Bankruptcy Previsions of title 11 and the Federal Rules of Dankruptcy Previsions of title 11 and the Federal Rules of Dankruptcy Previsions of title 11 and the Federal Rules of Dankruptcy Prevision Rules of Dankruptcy Preceduce R		Thised Tunie and date, if any, of Dania aprey Tedaton Trepater
Address Email: info@semanchiklaw.com 732 240 4055 Fax: 732 240 3011 Telephone Number October 13, 2013 Date **In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Authorized Individual Title of Authorized Individual Title of Authorized Individual Title of Authorized Individual Title of Authorized Individual	Toms River, NJ 08753	
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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. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. Names and Social-Security numbers of all other individuals who preparassisted in preparing this document unless the bankruptcy petition preparent on an individual: Names and Social-Security numbers of all other individuals who preparassisted in preparing this document unless the bankruptcy petition preparent on an individual: V Signature of Authorized Individual If more than one person prepared this document, attach additional sheet conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in	Signature of Debtor (Corporation/Partnership)	- Date
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Title of Authorized Individual A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in	Drinted Name of Authorized Individual	conforming to the appropriate official form for each person.
Title of Authorized Individual title 11 and the Federal Rules of Bankruptcy Procedure may result in	Timed Name of Autorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of
	Title of Authorized Individual	title 11 and the Federal Rules of Bankruptcy Procedure may result in
Date	Date	

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court District of New Jersey

In re Shara M. Wolf

Debtor(s)

Case No.		
Chapter	7	

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

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

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

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

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

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

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

Case 13-32436-KCF Doc 1 Filed 10/13/13 Entered 10/13/13 11:37:52 Desc Main Document Page 5 of 49

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.

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

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

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

□ Active military duty in a military combat zone.

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

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

Signatu	re of Debtor:	/s/ Shara M. Wolf	
•		Shara M. Wolf	
Date:	October 13, 20 ⁴	13	

Page 2

Case 13-32436-KCF

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court District of New Jersey

In re

.

Shara M. Wolf

Debtor

Chapter	7	

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	Yes	1	250,000.00		
B - Personal Property	Yes	3	24,310.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		426,286.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		48,330.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,158.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,494.00
Total Number of Sheets of ALL Schedu	ıles	17			
	Te	otal Assets	274,310.00		
			Total Liabilities	474,616.00	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court

District of New Jersey

In re

Shara M. Wolf

Debtor

Case No.		

Chapter____**7**

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
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	2,158.00
Average Expenses (from Schedule J, Line 18)	2,494.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,400.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		170,267.00
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		48,330.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		218,597.00

B6A (Official Form 6A) (12/07)

In re

Shara M. Wolf

Case No.

Debtor

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 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.

7 North Raleigh Rd. Brick, NJ 08723		-	250,000.00	420,267.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Owned jointly with non filing spouse. House is in foreclosure.

> Sub-Total > 250,000.00 (Total of this page)

> > 250,000.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

Total >

B6B (Official Form 6B) (12/07)

In re

Shara M. Wolf

Case No.

Debtor

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 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 petition 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	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand		Location: 29 Southwind Circle, Jackson NJ 08527	-	10.00
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.		Checking Accounts Bank of America	-	200.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х			
4.	Household goods and furnishings, including audio, video, and computer equipment.		Miscellaneous home furnishing including tables, chairs, sofa, tv, bedroom set.	-	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Health books, music CD's, picutres on walls	-	200.00
6.	Wearing apparel.		Miscellaneous clothing including shirts, pants, shoes and jackets	-	1,000.00
7.	Furs and jewelry.		sterling silver jewlery and ring	-	700.00
8.	Firearms and sports, photographic, and other hobby equipment.		original Nikon Camera, Novitron Light kit	-	500.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issuer.	Х			

3,610.00

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Shara M. Wolf Case No. Debtor **SCHEDULE B - PERSONAL PROPERTY** (Continuation Sheet) Current Value of Debtor's Interest in Property, Husband, N O N E Wife, Type of Property Description and Location of Property Joint, or without Deducting any Secured Claim or Exemption Community 11. Interests in an education IRA as Х 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 interest(s). 11 U.S.C. § 521(c).) 12. Interests in IRA, ERISA, Keogh, or Х other pension or profit sharing plans. Give particulars. Sirius Satellite radio 200.00 13. Stock and interests in incorporated and unincorporated businesses. Itemize. 14. Interests in partnerships or joint Х ventures. Itemize. 15. Government and corporate bonds Х and other negotiable and nonnegotiable instruments. Х 16. Accounts receivable. 17. Alimony, maintenance, support, and Х property settlements to which the debtor is or may be entitled. Give particulars. 18. Other liquidated debts owed to debtor Х including tax refunds. Give particulars. 19. Equitable or future interests, life Х estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. 20. Contingent and noncontingent Х interests in estate of a decedent, death benefit plan, life insurance policy, or trust. 21. Other contingent and unliquidated Х claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

200.00

Sub-Total >

B6B (Official Form 6B) (12/07) - Cont.

In	re Shara M. Wolf		Case	e No	
			Debtor		
		SCHE	DULE B - PERSONAL PROPERTY (Continuation Sheet)	Z	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
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 defined 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.	-	Mazda 2 with 20000 miles. Automobile has in three accidents	-	9,000.00
26.	Boats, motors, and accessories.	x			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	х			
29.	Machinery, fixtures, equipment, and supplies used in business.	x			
80.	Inventory.	X			
31.	Animals.	One	small dog	-	0.00
32.	Crops - growing or harvested. Give particulars.	x			
33.	Farming equipment and implements.	X			
4.	Farm supplies, chemicals, and feed.	х			
35.	Other personal property of any kind not already listed. Itemize.		er/ Mobil Home Primary residence with my son ented lot	ı -	11,500.00

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re

. Shara M. Wolf Case No. Debtor 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 (Check one box) \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter ■ 11 U.S.C. §522(b)(2) □ 11 U.S.C. §522(b)(3) with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Cash on Hand</u> Location: 29 Southwind Circle, Jackson NJ 08527	11 U.S.C. § 522(d)(5)	10.00	10.00
<u>Checking, Savings, or Other Financial Accounts, C</u> Checking Accounts Bank of America	<u>ertificates of Deposit</u> 11 U.S.C. § 522(d)(5)	200.00	200.00
<u>Household Goods and Furnishings</u> Miscellaneous home furnishing including tables, chairs, sofa, tv, bedroom set.	11 U.S.C. § 522(d)(3)	1,000.00	1,000.00
<u>Books, Pictures and Other Art Objects; Collectible</u> Health books, music CD's, picutres on walls	<u>s</u> 11 U.S.C. § 522(d)(3)	200.00	200.00
<u>Wearing Apparel</u> Miscellaneous clothing including shirts, pants, shoes and jackets	11 U.S.C. § 522(d)(3)	1,000.00	1,000.00
Furs and Jewelry sterling silver jewlery and ring	11 U.S.C. § 522(d)(4)	700.00	700.00
<u>Firearms and Sports, Photographic and Other Hob</u> original Nikon Camera, Novitron Light kit	<u>by Equipment</u> 11 U.S.C. § 522(d)(5)	500.00	500.00
<u>Stock and Interests in Businesses</u> Sirius Satellite radio	11 U.S.C. § 522(d)(5)	200.00	200.00
Automobiles, Trucks, Trailers, and Other Vehicles 2011 Mazda 2 with 20000 miles. Automobile has been in three accidents	11 U.S.C. § 522(d)(2)	3,675.00	9,000.00
<u>Other Personal Property of Any Kind Not Already I</u> Trailer/ Mobil Home Primary residence with my son on rented lot	<u>-isted</u> 11 U.S.C. § 522(d)(5)	11,500.00	11,500.00

B6D (Official Form 6D) (12/07)

In re

Shara M. Wolf

Case No._

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor

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.

other security interests. List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, 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" 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" 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. Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

		: 1	usband, Wife, Joint, or Community	С	U	D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)			DATE CLAIM WAS INCURRED,	C O N ⊢	LQUL	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxx7940			Opened 11/14/11 Last Active 7/01/13	Т	D A T E D			
Ally Financial 200 Renaissance Ctr Detroit, MI 48243		-	Automobile Loan 2011 Mazda 2 with 20000 miles. Automobile has been in three accidents		D			
			Value \$ 9,000.00				6,019.00	0.00
Account No. xxxxxxx6209 Chase Po Box 24696 Columbus, OH 43224	_	-	Opened 1/25/07 Last Active 3/15/10 17 North Raleigh Rd. Brick, NJ 08723 Owned jointly with non filing spouse. House is in foreclosure.				348,988.00	98,988.00
Account No. xxxxxxxxxxx7320		+	Opened 4/23/07 Last Active 7/08/10	\vdash			0.0,000.00	
Pnc Bank 103 Bellevue Pkwy Wilmington, DE 19809		-	17 North Raleigh Rd. Brick, NJ 08723 Owned jointly with non filing spouse. House is in foreclosure.					
		+	Value \$ 250,000.00				71,279.00	71,279.00
Account No.			Value \$					
0 continuation sheets attached			(Total of t	Sub his			426,286.00	170,267.00
				Т	ota	1	426,286.00	170,267.00

B6E (Official Form 6E) (4/13)

In re

Shara M. Wolf

Case No.

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Debtor

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 <u>not</u> 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 "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.

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 \$12,475* 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 \$6,150* 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 \$2,775* 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 the 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).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re

Shara M. Wolf

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Debtor

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 the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. 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 (See instructions above.)	C O D E B T O R	H U H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.			S P U T E D	AMOUNT OF CLAIM
Account No. xxxxx4279				T	A T E D		
A Womans Place LLC 34 Sycamore Ave. Suite 2A Little Silver, NJ 07739		-			D		15.00
Account No. 8174		+	Opened 12/31/02 Last Active 5/01/11		╈	+	
Bank Of America Po Box 982235 El Paso, TX 79998		-	Credit Card				
Account No. Sharon Austin					+	_	966.00
Brian A. Kohler, DC 555 Aldrich Rd. Howell, NJ 07731		-					14.00
Account No. xxxxx7449		+		+	╀	╀	14.00
Cental Jersey Emergency c/o ACB Receivables Management 19 Main St. Asbury Park, NJ 07712		-					580.00
				Sut			560.00
continuation sheets attached			(Total o				1,575.00

B6F (Official Form 6F) (12/07) - Cont.

In re

Shara M. Wolf

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

OPEDITOP'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE BT OR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	NLIQUIDATED	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxx0074			Opened 8/29/06 Last Active 3/01/10	Т	E		
Chase Po Box 15298 Wilmington, DE 19850		-	Credit Card		D		10,423.00
Account No. xx-xx98-10		$\left \right $			╀		10,420100
Chase c/o Brad Layton, ESQ. 900 US HWY 9 North STE 60 Woodbridge, NJ 07095		-					
Account No. xxxxx4778							Unknown
Citibank c/o Unifund PO Box 505 Linden, MI 48451		-					25,885.00
Account No. xxxxx5309		\square			+	+	
Community Medical Center PO Box 903 Oceanport, NJ 07757		-					265.00
Account No. xxxxx4644	+	\vdash		_	+	-	265.00
DBLPATH 110 Washington Ave. 2nd Fl North Haven, CT 06473		-					16.00
Sheet no1 of _4 sheets attached to Schedule of	f	1	1	Sub	tota	al	
Creditors Holding Unsecured Nonpriority Claims			(Total of				36,589.00

B6F (Official Form 6F) (12/07) - Cont.

In re

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	С	L	sband, Wife, Joint, or Community		U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	СОХ⊢∟ХСШХ		ISPUTED	AMOUNT OF CLAIM
Account No. xx-52-11				Т	T E		
Discover c/o Eichenbaum & Stylianou, LLC PO box 914 Paramus, NJ 07653		-			D		Unknown
Account No. xxxxxx5724			Opened 10/23/07 Last Active 2/17/10	+	┢		
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		-	Credit Card				8,134.00
Account No. Shara Wolf	╈			+	\vdash		
Gold Protective Systems 41 East Main St. Freehold, NJ 07728		-					1,000.00
Account No.	╋	\square		+	┢	\vdash	
Jay I. Austin Brick, NJ 08723		-					
Assound No. www.F200							Unknown
Account No. xxxxx5309 Jersey Emergency Medicine Spec. c/o AR Resources Inc. PO Box 1056 Blue Bell, PA 19422		-					119.00
Sheet no. _2 of _4 sheets attached to Schedule of		-		Sub			9,253.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	5,235.00

B6F (Official Form 6F) (12/07) - Cont.

In re

Shara M. Wolf

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxx8422	CODEBTOR	H J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		NLLQULDATE	D I S P UT E D	AMOUNT OF CLAIM
Lifeline Medical Associates 99 Cherry HII Rd. Ste. 220 Parsippany, NJ 07054		-			D		28.00
Account No. xxxx5362					┢		
MCOC Meridian Heath Systems c/o Certified Credit & Collection Bureau PO Box 336 Raritan, NJ 08869		-					149.00
Account No. xxxx1001					t	T	
Point Pleasant Radiology Group PO Box 3131 Point Pleasant Beach, NJ 08742		-					55.00
Account No. aussh000				+			
Richard B. Menashe DO 15 South Main St, Edison, NJ 08837		-					100.00
Account No. Shara Wolf				_	-	-	188.00
Shore Imaging 1166 River Ave. 09801		-					Unknown
Sheet no. <u>3</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_	-	(Total of	Sub			420.00

B6F (Official Form 6F) (12/07) - Cont.

In re

Shara M. Wolf

Debtor

Case No._____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

l c	н.	ishand Wife Joint or Community		: 1			
	H W J		N T			SPUTE	AMOUNT OF CLAIM
R						D	
				Ē	,		
	-						
_			+		+	_	471.00
	-						
							Unknown
	-						22.00
					╈	1	
	-						Unknown
╞			+		\dagger	┥	
						$\overline{)}$	493.00
				Tot	tal	Ī	48,330.00
	CODUBTOR	ODH BBW	R c IS SUBJECT TO SETOFF, SO STATE. I - I	0 1 DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. 1 1 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	n CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. N n n n	0 DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. N<	B J CONSIDERATION FOR CLAIM. IF CLAIM I

B6G (Official Form 6G) (12/07)

In re

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Shara M. Wolf

Case No.

Debtor

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 nature of debtor's interest 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 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.

B6H (Official Form 6H) (12/07)

In re

Shara M. Wolf

Case No.

Debtor

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 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 debtor's 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 debtor has no codebtors.

Jay Ira Austin

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Chase PO Box 15153 Wilmington, DE 19886-5153

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B6I (Official Form 6I) (12/07) In re Shara M. Wolf

Case No.

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

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 SH	POUSE		
	RELATIONSHIP(S):	AGE(S):			
Separated	Son	9			
Employment:	DEBTOR		SPOUSE		
Occupation Di	sabled				
Name of Employer					
How long employed					
Address of Employer					
INCOME: (Estimate of average or pro	jected monthly income at time case filed)		DEBTOR		SPOUSE
	mmissions (Prorate if not paid monthly)	\$	0.00	\$	N/A
2. Estimate monthly overtime		\$	0.00	\$	N/A
3. SUBTOTAL		\$	0.00	\$	N/A
4. LESS PAYROLL DEDUCTIONS					
a. Payroll taxes and social securit	V	\$	0.00	\$	N/A
b. Insurance	3	\$	0.00	\$	N/A
c. Union dues		\$	0.00	\$	N/A
d. Other (Specify):		\$	0.00	\$	N/A
		\$	0.00	\$	N/A
5. SUBTOTAL OF PAYROLL DEDU	CTIONS	\$	0.00	\$	N/A
6. TOTAL NET MONTHLY TAKE H	OME PAY	\$	0.00	\$	N/A
7. Regular income from operation of b	usiness or profession or farm (Attach detailed statem	ent) \$	0.00	\$	N/A
8. Income from real property		\$	0.00	\$	N/A
9. Interest and dividends		\$	0.00	\$	N/A
10. Alimony, maintenance or support p dependents listed above	payments payable to the debtor for the debtor's use of	r that of \$	1,400.00	\$	N/A
11. Social security or government assist	stance				
(Specify): Social Security		\$	537.00	\$	N/A
SSI		\$	221.00	\$	N/A
12. Pension or retirement income		\$	0.00	\$	N/A
13. Other monthly income (Specify):		\$	0.00	\$	N/A
		\$	0.00	\$	N/A
14. SUBTOTAL OF LINES 7 THROU	JGH 13	\$	2,158.00	\$	N/A
15. AVERAGE MONTHLY INCOME	E (Add amounts shown on lines 6 and 14)	\$	2,158.00	\$	N/A
16. COMBINED AVERAGE MONTH	ILY INCOME: (Combine column totals from line 15	5)	\$	2,158	.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:

Case 13-32436-KCF Doc 1 Filed 10/13/13 Entered 10/13/13 11:37:52 Desc Main 10/13/13 11:36AM Page 23 of 49

Debtor(s)

Document

Case No.

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. 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 22A 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."

b. Is property insurance included? Yes No X 2. Utilities: a. Electricity and heating fuel \$ b. Water and sewer \$ 0.00 c. Telephone \$ 0.00 d. Other See Detailed Expense Attachment \$ 0.00 3. Home maintenance (repairs and upkeep) \$ 413.00 4. Food \$ 0.00 5. Clothing \$ 400.00 6. Laundry and dry cleaning \$ 90.00 7. Medical and dental expenses \$ 200.00 8. Transportation (not including car payments) \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 200.00 10. Charitable contributions \$ 200.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 20.00 8. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 0.00 g. Ciptfy) \$ 0.00 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the \$ plan) \$ 0	1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? Yes X No	\$ 472.00
2. Utilities: a. Electricity and heating fuel \$ 300.00 b. Water and sewer \$ 0.00 c. Telephone \$ 0.00 d. Other See Detailed Expense Attachment \$ 413.00 3. Home maintenance (repairs and upkeep) \$ 410.00 \$ 413.00 4. Food \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$ \$ 400.00 \$		
b. Water and sever c. Telephone d. Other <u>See Detailed Expense Attachment</u> 3. Home maintenance (repairs and upkeep) 4. Food 5. Clothing 6. Laundry and dry cleaning 7. Medical and dental expenses 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto b. Other c. Other 14. Alimony, maintenance, and support paid to others b. Conservation (as a support paid to others) b. Conservation (as a support paid to support paid to support paid to support paid to s		¢ 300.00
c. Telephone \$ 0.00 d. Other See Detailed Expense Attachment \$ 413.00 3. Home maintenance (repairs and upkeep) \$ 100.00 \$ 4. Food \$ 400.00 \$ 400.00 5. Clothing \$ 50.00 \$ 400.00 6. Laundry and dry cleaning \$ 10.00 \$ 50.00 7. Medical and dental expenses \$ 200.00 \$ 200.00 8. Transportation (not including car payments) \$ 200.00 \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 50.00 \$ 200.00 10. Charitable contributions \$ 0.00 \$ \$ 0.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 25.00 \$ 0.00 2. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.00 \$ 0.00 12. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.00 \$ 0.00 13. Installment payments: (In chapter 111, 12, and 13 cases, do not list payments to be included in the p		φ
d. Other See Detailed Expense Attachment \$ 413.00 3. Home maintenance (repairs and upkeep) \$ 100.00 4. Food \$ 100.00 5. Clothing \$ 400.00 6. Laundry and dry cleaning \$ 50.00 7. Medical and dental expenses \$ 200.00 8. Transportation (not including car payments) \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 50.00 10. Charitable contributions \$ 200.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 25.00 a. Homeowner's or renter's \$ 25.00 b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 0.00 12. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.00 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) \$ 174.00 a. Auto \$ 0.00 \$ 0.00 14. Alimony, maintenance, and support paid to others 0.00 \$ 0.00		φ
3. Home maintenance (repairs and upkeep) \$ 100.00 4. Food \$ 400.00 5. Clothing \$ 50.00 6. Laundry and dry cleaning \$ 100.00 7. Medical and dental expenses \$ 200.00 8. Transportation (not including car payments) \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 50.00 10. Charitable contributions \$ 0.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 25.00 a. Homeowner's or renter's \$ 25.00 b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 0.00 12. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.00 (Specify) \$ 0.00 \$ 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) \$ 0.00 a. Auto \$ 0.00 \$ 0.00 b. Other \$ 0.00 \$ 0.00 14. Alimony, maintenance, a		φ
4. Food \$ 400.00 5. Clothing \$ 50.00 6. Laundry and dry cleaning \$ 50.00 7. Medical and dental expenses \$ 200.00 8. Transportation (not including car payments) \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 50.00 10. Charitable contributions \$ 0.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 0.00 a. Homeowner's or renter's \$ 0.000 b. Life \$ 0.000 c. Health \$ 0.000 d. Auto \$ 0.000 e. Other \$ 0.000 12. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.000 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) \$ 174.00 a. Auto \$ 0.000 \$ 0.000 b. Other \$ 0.000 \$ 0.000 \$ 14. Alimony, maintenance, and support paid to others \$ 0.0000 \$ 0.0000 <td></td> <td>φ</td>		φ
5. Clothing \$ 50.00 6. Laundry and dry cleaning \$ 10.00 7. Medical and dental expenses \$ 200.00 8. Transportation (not including car payments) \$ 200.00 9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 50.00 10. Charitable contributions \$ 50.00 11. Insurance (not deducted from wages or included in home mortgage payments) \$ 0.00 a. Homeowner's or renter's \$ \$ b. Life \$ 0.00 c. Health \$ 0.00 d. Auto \$ 100.00 e. Other \$ 0.00 12. Taxes (not deducted from wages or included in home mortgage payments) \$ 0.00 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) \$ 174.00 a. Auto \$ 174.00 \$ 0.00 b. Other \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 <td< td=""><td></td><td>·</td></td<>		·
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plan) a. Auto b. Other c. Other 14. Alimony, maintenance, and support paid to others b. Other c. Other 14. Alimony, maintenance, and support paid to others b. Other c.	(Specify)	\$ 0.00
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c. Other 5 0.00 14. Alimony, maintenance, and support paid to others 5 0.00	a. Auto	\$174.00
c. Other \$ 0.00	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	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	16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$0.00
17. Other \$ 0.00	17. Other	\$ 0.00
		\$ 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.)		, \$
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 Average monthly income from Line 15 of Schedule I 2,158.00 a. \$ 2,494.00 Average monthly expenses from Line 18 above \$ b. -336.00

Monthly net income (a. minus b.) c.

B6J (Official Form 6J) (12/07) Shara M. Wolf

In re

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B6J (Official Form 6J) (12/07) In re Shara M. Wolf

Debtor(s)

Case No.

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Detailed Expense Attachment

Other Utility Expenditures:

Cable	\$ 92.00
wireless	\$ 180.00
Triple Play internet/cable/phone	\$ 96.00
GPS Home Alarm	\$ 45.00
Total Other Utility Expenditures	\$ 413.00

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10/13/13 11:36AM

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court

District of New Jersey

Shara M. Wolf Case No. In re Debtor(s) Chapter 7 **DECLARATION CONCERNING DEBTOR'S SCHEDULES** DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **19** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date October 13, 2013

/s/ Shara M. Wolf Signature

Shara M. Wolf Debtor

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

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10/13/13 11:36AM

B7 (Official Form 7) (04/13)

United States Bankruptcy Court District of New Jersey

Shara M. Wolf In re

Debtor(s)

Case No. Chapter

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; 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 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 also may 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 persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

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 П 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
\$16,000.00	2011 Income
\$16,000.00	2012 Income
\$10,000.00	YTD Income

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, or 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.)

> AMOUNT SOURCE

B7 (Official Form 7) (04/13)

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 credit 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.)

NAME AND ADDRESS	DATES OF		AMOUNT STILL
OF CREDITOR	PAYMENTS	AMOUNT PAID	OWING

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 the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. 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 credit 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.)

		AMOUNT	
	DATES OF	PAID OR	
	PAYMENTS/	VALUE OF	AMOUNT STILL
NAME AND ADDRESS OF CREDITOR	TRANSFERS	TRANSFERS	OWING

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.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING

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.)

CAPTION OF SUIT	NATURE OF	COURT OR AGENCY	STATUS OR
AND CASE NUMBER	PROCEEDING	AND LOCATION	DISPOSITION
Chase vs Austin ; Foreclosure of Brick Property			

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.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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3							
	5. Repossessions, foreclosures and	returns					
None							
	ND ADDRESS OF FOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AI PROPE				
	6. Assignments and receiverships						
None	this case. (Married debtors filing und	rty for the benefit of creditors made with ler chapter 12 or chapter 13 must include uses are separated and a joint petition is	le any assignment by e				
NAME A	ND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIC	GNMENT OR SETTLEMENT			
None	preceding the commencement of this	n the hands of a custodian, receiver, or o case. (Married debtors filing under cha nether or not a joint petition is filed, unl	pter 12 or chapter 13	must include information concerning			
	ND ADDRESS USTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY			
	7. Gifts						
None	and usual gifts to family members ag aggregating less than \$100 per recipi	ons made within one year immediately p gregating less than \$200 in value per in tent. (Married debtors filing under chap t a joint petition is filed, unless the spou	dividual family memb ter 12 or chapter 13 m	ber and charitable contributions ust include gifts or contributions by			
	AND ADDRESS OF OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT			
	8. Losses						
None	since the commencement of this cas	casualty or gambling within one year in se. (Married debtors filing under chapte on is filed, unless the spouses are separa	r 12 or chapter 13 mu	st include losses by either or both			
	PTION AND VALUE PROPERTY	DESCRIPTION OF C LOSS WAS COVERE BY INSURANCE		PART DATE OF LOSS			
	9. Payments related to debt counse	eling or bankruptcy					
None		ransferred by or on behalf of the debtor funder the bankruptcy law or preparation case.					
OF I Law Offi 1130 Ho	ND ADDRESS PAYEE ice of David A. Semanchik oper Ave. iver, NJ 08753	DATE OF PAYMENT NAME OF PAYER IF OT THAN DEBTOR July 2013	•	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$894.00			

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	al Form 7) (04/13)						
4	10. Other transfers						
None	a. List all other property, other transferred either absolutely or a filing under chapter 12 or chapter spouses are separated and a joint	s security within er 13 must includ	two years immediate transfers by either	ately preceding th	he commencen	ent of this case. (Married debto	
	ND ADDRESS OF TRANSFERE ELATIONSHIP TO DEBTOR		DATE	DESC		RTY TRANSFERRED UE RECEIVED	
None	b. List all property transferred b trust or similar device of which t	by the debtor with the debtor is a be	in ten years immed neficiary.	liately preceding	the commence	ement of this case to a self-settle	ed
NAME C DEVICE	OF TRUST OR OTHER		DATE(S) OF IRANSFER(S)	VALU		EY OR DESCRIPTION AND RTY OR DEBTOR'S INTERES	ST
	11. Closed financial accounts						
None	List all financial accounts and in otherwise transferred within one financial accounts, certificates o cooperatives, associations, broke include information concerning unless the spouses are separated	year immediatel f deposit, or othe erage houses and accounts or instru	y preceding the con r instruments; share other financial inst uments held by or fo	nmencement of t es and share acco itutions. (Marrie	this case. Inclu unts held in ba d debtors filing	de checking, savings, or other nks, credit unions, pension func under chapter 12 or chapter 13	ds, 3 must
NAME A	AND ADDRESS OF INSTITUTIO	N	TYPE OF ACCO DIGITS OF AC AND AMOUNT (COUNT NUMB	SER,	AMOUNT AND DATE OF S OR CLOSING	ALE
	12. Safe deposit boxes						
None	List each safe deposit or other be immediately preceding the comm depositories of either or both spe filed.)	nencement of this	s case. (Married del	otors filing under	chapter 12 or	chapter 13 must include boxes of	or
	AND ADDRESS OF BANK THER DEPOSITORY	OF THOSE W) ADDRESSES /ITH ACCESS DEPOSITORY		CRIPTION CONTENTS	DATE OF TRANSFEI SURRENDER, IF A	
	13. Setoffs						
None	List all setoffs made by any cred commencement of this case. (Ma spouses whether or not a joint po	arried debtors fili	ng under chapter 12	2 or chapter 13 n	nust include int	formation concerning either or b	ooth
NAME A	AND ADDRESS OF CREDITOR		DATE OF SETOF	F		AMOUNT OF SETOFF	
	14. Property held for another	person					
None	List all property owned by anoth	er person that the	e debtor holds or co	ontrols.			
NAME A	AND ADDRESS OF OWNER	DESCRIPTIO	N AND VALUE O	F PROPERTY	LOCATIO	N OF PROPERTY	

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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.

ADDRESS

5

NAME USED

DATES OF OCCUPANCY

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.

NAME

17. Environmental Information.

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 a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None 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:

	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
SITE NAME AND ADDRESS	GOVERNMENTAL UNIT	NOTICE	LAW

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.

	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
SITE NAME AND ADDRESS	GOVERNMENTAL UNIT	NOTICE	LAW

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.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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6

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.

	LAST FOUR DIGITS OF			
	SOCIAL-SECURITY OR			
	OTHER INDIVIDUAL			
	TAXPAYER-I.D. NO.			BEGINNING AND
NAME	(ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	ENDING DATES

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.

NAME	ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent 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 in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go *directly to the signature page.*)

19. Books, records and financial statements

ADDRESS

None a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books None of account and records, or prepared a financial statement of the debtor.

NAME

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records None of the debtor. If any of the books of account and records are not available, explain.

NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATES SERVICES RENDERED

DATES SERVICES RENDERED

ADDRESS

DATE ISSUED

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B7 (Officia 7	al Form 7) (04/13)				
<u></u>	20. Inventories				
None	and the dollar amount and basis of each inventory.				
DATE C	OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)		
None ■	b. List the name and a	address of the person having possession of the records of e	each of the inventories reported in a., above.		
DATE C	OF INVENTORY	NAME AND ADDR RECORDS	ESSES OF CUSTODIAN OF INVENTORY		
	21 . Current Partner	rs, Officers, Directors and Shareholders			
None	a. If the debtor is a pa	artnership, list the nature and percentage of partnership into	erest of each member of the partnership.		
NAME A	AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST		
None		orporation, list all officers and directors of the corporation, bercent or more of the voting or equity securities of the corp			
NAME A	AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP		
	22 . Former partner	s, officers, directors and shareholders			
None	a. If the debtor is a pa commencement of the	artnership, list each member who withdrew from the partne is case.	ership within one year immediately preceding the		
NAME		ADDRESS	DATE OF WITHDRAWAL		
None					
NAME A	AND ADDRESS	TITLE	DATE OF TERMINATION		
	23 . Withdrawals fro	om a partnership or distributions by a corporation			
None	If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.				
OF REC	& ADDRESS IPIENT, IONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY		
	24. Tax Consolidation	on Group.			
None		poration, list the name and federal taxpayer identification n es of which the debtor has been a member at any time with			

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

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25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

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 **October 13, 2013**

Signature /s/ Shara M. Wolf Shara M. Wolf

Debtor

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

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B8 (Form 8) (12/08)

United States Bankruptcy Court District of New Jersey

In re	Shara M. Wolf		Case No.	
		Debtor(s)	Chapter	7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Ally Financial	Describe Property Securing Debt: 2011 Mazda 2 with 20000 miles. Automobile has been in three accidents
Property will be (check one):	
□ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain(for example, av	roid lien using 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	□ Not claimed as exempt

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1	
Lessor's Name: -NONE-	 Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date October 13, 2013

Signature /s/ Shara M. Wolf

Shara M. Wolf Debtor

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United States Bankruptcy Court District of New Jersey

In re	Shara M. Wolf		·	Case No.		
			Debtor(s)	Chapter	7	
	DISCLOSU	RE OF COMPENSAT	ION OF ATTORN	YEY FOR DE	BTOR(S)	
c	ompensation paid to me within	and Bankruptcy Rule 2016(b), I of one year before the filing of the otor(s) in contemplation of or in o	petition in bankruptcy, or	agreed to be paid	to me, for services rende	ered or to
	For legal services, I have a	greed to accept		\$	894.00	
	Prior to the filing of this st	atement I have received		\$	894.00	
					0.00	
2. \$ <u></u>	306.00 of the filing fee h	nas been paid.				
3. T	he source of the compensation	paid to me was:				
	Debtor		Other (specify):			
4. T	he source of compensation to l	be paid to me is:				
	Debtor		Other (specify):			
	copy of the agreement, toge	bove-disclosed compensation wit ther with a list of the names of th d fee, I have agreed to render leg	e people sharing in the co	mpensation is atta	ched.	firm. A
b c.	. Preparation and filing of any	ncial situation, and rendering adv petition, schedules, statement of at the meeting of creditors and c	f affairs and plan which m	ay be required;		otcy;
7. B	Representation of t), the above-disclosed fee does no he debtors in any discharge y proceedings or preparatio	eability actions, judicia	al lien avoidance	es, relief from stay a	ctions or
		CER	FIFICATION			
	certify that the foregoing is a c ankruptcy proceeding.	complete statement of any agreem	nent or arrangement for pa	yment to me for re	presentation of the debt	or(s) in
Dated:	October 13, 2013		/s/ David A. Semano	chik		_
			David A. Semanchil Law Office of David 1130 Hooper Ave. Toms River, NJ 087	A. Semanchik		

732 240 4055 Fax: 732 240 3011 info@semanchiklaw.com

3 201A (Form 201A) (11/12)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (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.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

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 <u>before</u> 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. Each debtor in a joint case must complete the briefing.

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. Each debtor in a joint case must complete the course.

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

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

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, the United States trustee (or bankruptcy administrator), the trustee, or 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.

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.

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.

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.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Form B 201A, Notice to Consumer Debtor(s)

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Page 2

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.

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.

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 (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

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, \$46 administrative fee: Total fee \$246)

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 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. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court District of New Jersey

Shara M. Wolf In re

Debtor(s)

Case No. Chapter

7

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Shara M. Wolf

Printed Name(s) of Debtor(s)

Case No. (if known)

Х	/s/ Shara M. Wolf	October 13, 2013
	Signature of Debtor	Date
Х		
	Signature of Joint Debtor (if any)	Date

Signature of Joint Debtor (if any)

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court District of New Jersey

In re Shara M. Wolf

Debtor(s)

Case No. Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: October 13, 2013

/s/ Shara M. Wolf

Shara M. Wolf Signature of Debtor

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A Womans Place LLC 34 Sycamore Ave. Suite 2A Little Silver, NJ 07739

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Bank Of America Po Box 982235 El Paso, TX 79998

Brian A. Kohler, DC 555 Aldrich Rd. Howell, NJ 07731

Cental Jersey Emergency c/o ACB Receivables Management 19 Main St. Asbury Park, NJ 07712

Chase Po Box 24696 Columbus, OH 43224

Chase Po Box 15298 Wilmington, DE 19850

Chase c/o Brad Layton, ESQ. 900 US HWY 9 North STE 60 Woodbridge, NJ 07095

Citibank c/o Unifund PO Box 505 Linden, MI 48451

Community Medical Center PO Box 903 Oceanport, NJ 07757

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DBLPATH 110 Washington Ave. 2nd Fl North Haven, CT 06473

Discover c/o Eichenbaum & Stylianou, LLC PO box 914 Paramus, NJ 07653

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Gold Protective Systems 41 East Main St. Freehold, NJ 07728

Jay I. Austin Brick, NJ 08723

Jay Ira Austin

Jersey Emergency Medicine Spec. c/o AR Resources Inc. PO Box 1056 Blue Bell, PA 19422

Lifeline Medical Associates 99 Cherry Hll Rd. Ste. 220 Parsippany, NJ 07054

MCOC Meridian Heath Systems c/o Certified Credit & Collection Bureau PO Box 336 Raritan, NJ 08869

Pnc Bank 103 Bellevue Pkwy Wilmington, DE 19809

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Point Pleasant Radiology Group PO Box 3131 Point Pleasant Beach, NJ 08742

Richard B. Menashe DO 15 South Main St, Edison, NJ 08837

Shore Imaging 1166 River Ave. 09801

Southwind Village 435 East Vererans Hwy. Jackson, NJ 08527

Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735

Tidal Emergency Physicians PO Box 41433 Philadelphia, PA 19101-1433

Woman's Place 34 Sycamore Ave. Ste 2a Little Silver, NJ 07739 Case 13-32436-KCF

B22A (Official Form 22A) (Chapter 7) (04/13)

In re Shara M. Wolf

Case Number:

(If known)

Debtor(s)

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According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- ☐ The presumption arises.
- The presumption does not arise.
- □ The presumption is temporarily inapplicable.

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. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by 707(b)(2)(C).

Part I. MILITARY AND NON-CONSUMER DEBTORS
Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the 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.
Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. \S 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. \S 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. \S 901(1)).
Non-consumer Debtors. 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.
Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends.
Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
 a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
OR
 b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

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	Part II. CALCULATION OF M	[0]	THLY INC	CO	ME FOR § 707(b)(7) E	XCLUSION	[
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.							
	a. 🔲 Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.							
2	 Married, not filing jointly, with declaration perjury: "My spouse and I are legally separate for the purpose of evading the requirements of Income") for Lines 3-11. 	ed ur	nder applicable	non	n-bankruptcy law or my s	spous	e and I are living	g apart other than
	c. D Married, not filing jointly, without the decl ("Debtor's Income") and Column B ("Spou					2.b al	bove. Complete	both Column A
	d. D Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B					(''Sp	ouse's Income'')) for Lines 3-11.
	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						Column A	Column B
	the filing. If the amount of monthly income varied six-month total by six, and enter the result on the a	dur	ing the six mor				Debtor's Income	Spouse's Income
3	Gross wages, salary, tips, bonuses, overtime, con	nmi	ssions.			\$	0.00	\$
	Income from the operation of a business, profess enter the difference in the appropriate column(s) of business, profession or farm, enter aggregate numb	f Lir	e 4. If you ope	erate	e more than one			
	not enter a number less than zero. Do not include							
4	Line b as a deduction in Part V.	—	DI		G	1		
	a. Gross receipts	\$	Debtor 0.	.00	Spouse \$			
	b. Ordinary and necessary business expenses	\$	0.	00	\$			
	c. Business income	Su	btract Line b fr	om	Line a	\$	0.00	\$
	Rent and other real property income. 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. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.							
5			Debtor		Spouse			
	a. Gross receipts	\$ \$.00 .00				
	b.Ordinary and necessary operating expensesc.Rent and other real property income		btract Line b fr			\$	0.00	\$
6	Interest, dividends, and royalties.	<u>.</u>				\$		\$
7	Pension and retirement income.					\$	0.00	\$
8	Any amounts paid by another person or entity, or expenses of the debtor or the debtor's dependent purpose. Do not include alimony or separate main spouse if Column B is completed. Each regular pa if a payment is listed in Column A do not report th	ts, iı tena yme	ncluding child nce payments c ent should be re	sup or ar port	port paid for that nounts paid by your ted in only one column;	\$	0.00	\$
9	if a payment is listed in Column A, do not report that payment in Column B.Unemployment compensation. 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:					<u>.</u>		
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor	r \$	0.00	Sp	ouse \$	\$	0.00	\$
10	Income from all other sources. Specify source and on a separate page. Do not include alimony or sep spouse if Column B is completed, but include all maintenance. Do not include any benefits received received as a victim of a war crime, crime against h domestic terrorism.	oara oth	te maintenanc er payments o der the Social S anity, or as a vi	e pa f ali Secu	ayments paid by your imony or separate urity Act or payments in of international or			
	a. Alimony	\$	Debtor 1,400	.00	Spouse \$			
	b.	\$			\$	1		
	Total and enter on Line 10					\$	1,400.00	\$
11	Subtotal of Current Monthly Income for § 707(b Column B is completed, add Lines 3 through 10 in					_	1,400.00	

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12	Total Current Monthly Income for § 707(b)(7). 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.		1,400.00				
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION						
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the num enter the result.	aber 12 and	\$ 16,800.00				
14	Applicable median family income. Enter the median family income for the applicable state and housel (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy						
	a. Enter debtor's state of residence: NJ b. Enter debtor's household size:	2	\$ 69,697.00				
15	 Application of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. 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. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. 						
	Complete Parts IV, V, VI, and VII of this statement only if required. (S	ee Line 15	5.)				
	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR	§ 707(b)(2	2)				
16	Enter the amount from Line 12.		\$				
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed. Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor dependents. Specify in the lines below the basis for excluding the Column B income (such as payment spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. not check box at Line 2.c, enter zero. a. \$ b. \$ c. \$ d. \$ Total and enter on Line 17	's of the s) and the	\$				
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.		\$				
	ГЕ						
	Part V. CALCULATION OF DEDUCTIONS FROM INCOM Subpart A: Deductions under Standards of the Internal Revenue Service						
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS Standards for Food, Clothing and Other Items for the applicable number of persons. (This information at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is that would currently be allowed as exemptions on your federal income tax return, plus the number of an additional dependents whom you support.	S National is available the number	\$				
19B	r ds for of persons s of age or d currently ents whom result in esult in Line	\$					
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housi Utilities Standards; non-mortgage expenses for the applicable county and family size. (This informatio available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court). The applicable family size of the number that would currently be allowed as exemptions on your federal income tax return, plus the r any additional dependents whom you support.	on is consists of	\$				

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20B	Local Standards: housing and utilities; mortgage/rent expense. EnHousing and Utilities Standards; mortgage/rent expense for your couravailable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy cthe number that would currently be allowed as exemptions on your feany additional dependents whom you support); enter on Line b the toodebts secured by your home, as stated in Line 42; subtract Line b fromnot enter an amount less than zero.a.IRS Housing and Utilities Standards; mortgage/rental expenseb.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	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entil Standards, enter any additional amount to which you contend you are contention in the space below:	\$		
			Ψ	
22.4	Local Standards: transportation; vehicle operation/public transpo You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expense included as a contribution to your household expenses in Line 8.	f whether you pay the expenses of operating a		
22A	$\square 0 \square 1 \square 2 $ or more.			
	If you checked 0, enter on Line 22A the "Public Transportation" amou	int from IBS Local Standards:		
	Transportation. If you checked 1 or 2 or more, enter on Line 22A the			
	Standards: Transportation for the applicable number of vehicles in the			
	Census Region. (These amounts are available at www.usdoj.gov/ust/	\$		
22B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Tra Standards: Transportation. (This amount is available at <u>www.usdoj.gc</u> court.)	\$		
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an ownersy vehicles.)			
	\square 1 \square 2 or more.			
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Li the result in Line 23. Do not enter an amount less than zero.			
	a. IRS Transportation Standards, Ownership Costs	\$		
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the	2. Complete this Line only if you checked IRS Local Standards: Transportation		
24	(available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Li the result in Line 24. Do not enter an amount less than zero.			
	a. IRS Transportation Standards, Ownership Costs	\$		
	Average Monthly Payment for any debts secured by Vehicle b. 2. as stated in Line 42	\$		
	b. 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2	φ Subtract Line b from Line a.	\$	
25	Other Necessary Expenses: taxes. 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. Do not include real estate or sales taxes .			

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26	deductio		or employment. Enter the total average monthly payroll as retirement contributions, union dues, and uniform coary 401(k) contributions.		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
28	Other Necessary Expenses: court-ordered payments. 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. Do not include payments on past due obligations included in Line 44.				
29	<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.			for	
30			average monthly amount that you actually expend on reschool. <b>Do not include other educational payments.</b>	\$	
31	Other Necessary Expenses: health care. 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. Do not include payments for health insurance or health savings accounts listed in Line 34.				
32	Other Necessary Expenses: telecommunication services. 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. Do not include any amount previously deducted.				
33	Total E	xpenses Allowed under IRS Standards. Enter	the total of Lines 19 through 32.	\$	
	Ι	-	onal Living Expense Deductions benses that you have listed in Lines 19-32		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. 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.				
34	a.	Health Insurance	\$		
	b.	Disability Insurance	\$		
	с.	Health Savings Account	\$	\$	
		d enter on Line 34. o not actually expend this total amount, state	your actual total average monthly expenditures in the sp	ace	
35	<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.				
36	<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.				
37	<b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local				
38	actually school b <b>docume</b>	incur, not to exceed \$156.25* per child, for atter y your dependent children less than 18 years of	<b>18.</b> Enter the total average monthly expenses that you ndance at a private or public elementary or secondary age. <b>You must provide your case trustee with t explain why the amount claimed is reasonable and tandards.</b>	\$\$	

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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39	Additional food and clothing expenses expenses exceed the combined allowa Standards, not to exceed 5% of those or from the clerk of the bankruptcy co reasonable and necessary.	on is available at <u>www.usdoj.gov/ust/</u>	\$		
40		Enter the amount that you will conting rganization as defined in 26 U.S.C. §	the to contribute in the form of cash or $170(c)(1)-(2)$ .		
41	Total Additional Expense Deduction	ns under § 707(b). Enter the total of I	Lines 34 through 40	\$	
		Subpart C: Deductions for De	bt Payment		
42	<b>Future payments on secured claims</b> . own, list the name of the creditor, ide check whether the payment includes t scheduled as contractually due to each case, divided by 60. If necessary, list Payments on Line 42.				
	Name of Creditor	Property Securing the Debt	Average Monthly Does payment Payment include taxes or insurance?		
	a.		\$ □ yes □ no		
43	43       Total: Add Lines       S         43       Other payments on secured claims. If any of 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 o the following chart. If necessary, list a Name of Creditor	rder to avoid repossession or foreclosu additional entries on a separate page. Property Securing the Debt	re. List and total any such amounts in 1/60th of the Cure Amount		
	a		\$ Total: Add Lines	\$	
44			- I - I		
		• If you are eligible to file a case under y the amount in line b, and enter the re			
45	issued by the Executive Offic information is available at wy the bankruptcy court.)	apter 13 plan payment. strict as determined under schedules e for United States Trustees. (This <u>vw.usdoj.gov/ust/</u> or from the clerk of ive expense of chapter 13 case	\$ x Total: Multiply Lines a and b	\$	
46		• Enter the total of Lines 42 through 45		\$	
-+0	-	0		φ	
47		<b>Subpart D: Total Deductions f</b> er § 707(b)(2). Enter the total of Lines		\$	
+/		ETERMINATION OF § 707(I)		Ψ	
48		- ,		¢	
48		rrent monthly income for § 707(b)(2 tal of all deductions allowed under §		\$ \$	
50		<b>707(b)(2).</b> Subtract Line 49 from Line		\$	
		<b>§ 707(b)(2).</b> Multiply the amount in Li		Ψ	
51	result.	s (a)(=). Manapij no unount in E		\$	

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	Initial presumption determination. Check the applicable box and proceed as directed.					
52	<b>The amount on Line 51 is less than \$7,475</b> [*] . 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.					
52	<b>The amount set forth on Line 51 is more than \$12,475</b> * Check the box for "The presumption arises" a statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the					
	□ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of P	Part VI (Lines 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt	\$				
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable box and proceed as directed.	·				
55	<b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does 1 of this statement, and complete the verification in Part VIII.	s not arise" at the top of page				
	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	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required you and your family and that you contend should be an additional deduction from your current monthly inco 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your a each item. Total the expenses.	me under §				
20	Expense Description Monthly	Amount				
	a. \$					
	b. \$					
	c. \$					
	Total: Add Lines a, b, c, and d \$					
	Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this	is a joint case, both debtors				
	must sign.)					
57	Date: October 13, 2013 Signature: /s/ Shara M. Wolf Shara M. Wolf					
	(Debtor)					

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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