| United States B | | | | | | |
|---|--|---|--|--|--|--|
| United States Bankruptcy CourtDistrict of | | | INVOLUNTARY PETITION | | | |
| IN RE (Name of Debtor – If Individual: Last, First, N | Middle) | | ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.) | | | |
| Last four digits of Soc. Sec. or other Individual's Tax than one, state all.): | I.D. No./Complete EIN (If r | nore | | | | |
| STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) | | MAILING ADDRE | MAILING ADDRESS OF DEBTOR (If different from street address) | | | |
| COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF B | USINESS ZIP CO | ODE | ZIP CODE | | | |
| | | | | | | |
| LOCATION OF PRINCIPAL ASSETS OF BUSINE | SS DEBTOR (If different fr | om previously listed address | es) | | | |
| CHAPTER OF BANKRUPTCY CODE UNDER WE | IICH PETITION IS FILED | | | | | |
| ☐ Chapter 7 ☐ Chapter 1 | 1 | | | | | |
| INFORMATION REGARDING DEBTOR (Check applicable boxes) | | | | | | |
| Nature of Debts | | f Debtor | Nature of Business | | | |
| (Check one box.) Petitioners believe: □ Debts are primarily consumer debts □ Debts are primarily business debts | (Form of Organization) □ Individual (Includes Joint Debtor) □ 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.) | | (Check one box.) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) Railroad Stockbroker Commodity Broker Clearing Bank Other | | | |
| VENUE | <u> </u> | | FILING FEE (Check one box) | | | |
| Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District. | | □ Full Filing Fee attached □ Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. [If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.] | | | | |
| PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.) | | | | | | |
| Name of Debtor | Case Number | | Date | | | |
| Relationship | District | | Judge | | | |
| ALLEGATIONS (Check applicable boxes) 1. □ Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b). 2. □ The debtor is a person against whom an order for relief may be entered under title 11 of the United | | | COURT USE ONLY | | | |
| States Code. 3.a. The debtor is generally not paying such debto the subject of a bona fide dispute as to liability b. Within 120 days preceding the filing of this p | | | | | | |
| agent appointed or authorized to take charge debtor for the purpose of enforcing a lien aga | of less than substantially all | of the property of the | | | | |

| Name of Debtor | |
|----------------|------|
| | |
| Case No. | |

| TRANSFER OF CLAIM | | | | | | | |
|---|-----------------------------|---------------------------------------|--|--|--|--|--|
| □ Check this box if there has been a transfer of any claim against the debtor or to any petitioner. Attach all documents that evidence the transfer and any statements that are required under Bankruptcy Rule 1003(a). | | | | | | | |
| REQUEST FOR RELIEF | | | | | | | |
| Petitioner(s) request that an order for relief be enterpetition. If any petitioner is a foreign representative recognition is attached. | ered against the debtor und | der the chapter of title 11, United S | | | | | |
| Petitioner(s) declare under penalty of perjury that correct according to the best of their knowledge, in | | | | | | | |
| X | | X | | | | | |
| Signature of Petitioner or Representative (State title) | | Signature of Attorney | Date | | | | |
| Name of Petitioner | Date Signed | Name of Attorney Firm (If any) | | | | | |
| Name & Mailing | | Address | | | | | |
| Address of Individual Signing in Representative Capacity | | Telephone No. | | | | | |
| xSignature of Petitioner or Representative (State tit | le) | xSignature of Attorney | Date | | | | |
| Name of Petitioner | Date Signed | Name of Attorney Firm (If any) | | | | | |
| Name of retitioner | Date Signed | Name of Attorney Firm (if any) | | | | | |
| Name & Mailing | | Address | | | | | |
| Address of Individual Signing in Representative Capacity | | Telephone No. | | | | | |
| xSignature of Petitioner or Representative (State tit | le) | xSignature of Attorney | Date | | | | |
| Name of Petitioner | Date Signed | Name of Attorney Firm (If any) | | | | | |
| Name & Mailing Address of Individual | Ü | Address | | | | | |
| Signing in Representative Capacity | | Telephone No. | | | | | |
| PETITIONING CREDITORS | | | | | | | |
| Name and Address of Petitioner | | Nature of Claim | Amount of Claim | | | | |
| Name and Address of Petitioner | | Nature of Claim | Amount of Claim | | | | |
| Name and Address of Petitioner | | Nature of Claim | Amount of Claim | | | | |
| Note: If there are more than three petitioners, penalty of perjury, each petitioner's sig and petitioning creditor information in | nature under the statemer | | Total Amount of Petitioners' Claims | | | | |

continuation sheets attached

COMMITTEE NOTE

The form has been amended to delete statistical information about the debtor that no longer is required, and to substitute checkboxes similar to those on the voluntary petition form. The form also is amended to add "as to liability or amount" to the language concerning debts that are the subject of a bona fide dispute, in conformity with § 303 of the Code as amended by the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, Pub. L. No. 109-8, 119 Stat. 23 (April 20, 2005). The petitioning creditors must now provide, to the extent known to them, all other names used by the debtor during the 8 years, rather than 6 years, before the filing of the petition. In conformity with Rule 9037, the petitioning creditors are directed to provide only the last four digits of any individual's tax identification number. A new checkbox is provided for the petitioning creditors to identify the debtor that is a "health care business" as defined in § 101 of the Code, thereby alerting the court and the United States trustee of the necessity under § 333 of the Code to appoint an ombudsman to represent the interests of the patients of the health care business. These amendments also implement the 2005 amendments to the Code. A new checkbox also is provided for a "clearing bank," which may become a debtor upon the filing of a petition at the direction of the Board of Governors of the Federal Reserve System; this addition conforms to an amendment to § 109(b)(2) of the Code, which was enacted in 2000.