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Chapter you are filing under:	
■ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
☐ Chapter 13	☐ Check if this is an amended filing
	■ Chapter 7  □ Chapter 11 □ Chapter 12

#### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

06/22

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

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

Par	t1: Identify Yourself	Approximation of the second se	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Sharon	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Jean	
	license or passport).	Middle name	Middle name
	Bring your picture	Logan	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Sharon J. Hecox Sharon Jean Logan Hecox Shazon Jean Logan Sharon Logan Hecox	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2673	

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Debtor 1 Sharon Jean Logan

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☐ I have not used any business name or EINs.  AW Paw Protectors d/b/a Paw Protectors  Rescue	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		17378 Elm Street Fountain Valley, CA 92708 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Orange County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		P.O. Box 3771 Seal Beach, CA 90740	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			- 2

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		 		-	
		Main Do	cument	Page 3	3 of 68
Debtor 1	Sharon Jean Logan				Case number (if kn

Par	Tell the Court About	our E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Req</i> page 1 and check the a		42(b) for Individuals Filing	for Bankruptcy
	choosing to file under	■ Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	ically, if you are paying the	he fee yourself, you ma	k's office in your local cour ay pay with cash, cashier's ney may pay with a credit c	check, or money
					allments. If you choose s (Official Form 103A).	this option, sign and at	ttach the Application for Inc	dividuals to Pay
			I request tha	t my fee be wa	ived (You may request t	his option only if you a	re filing for Chapter 7. By la	aw, a judge may,
			but is not requapplies to you	iired to, waive y r family size an	our fee, and may do so do you are unable to pay	only if your income is le the fee in installments)	ess than 150% of the offici- . If you choose this option,	al poverty line that you must fill out
			the Applicatio	n to Have the C	Chapter 7 Filing Fee Wait	ved (Official Form 103E	3) and file it with your petition	on.
9.	Have you filed for bankruptcy within the	■ N	0.					
	last 8 years?	ΠY	es.					
			District					
			District	***************************************	When		Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ N	0					-
	cases pending or being filed by a spouse who is	ΠY	es.					
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			F	Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District	9	When	(	Case number, if known	
11.	Do you rent your	ΠN	lo. Go to li	ne 12.	and the state of t	A A A A A A A A A A A A A A A A A A A		
	residence?	■ Y	es. Has yo	ur landlord obta	ained an eviction judgme	nt against you?		
		ar—1005)		No. Go to line	12.			
			_	Yes. Fill out Ini	itial Statement About an	Eviction Judgment Age	ainst You (Form 101A) and	file it with this
			_	bankruptcy pet			Accesses a Scientification for SC	

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Debtor 1	Sharon	Jean	Logan

Pari					1 1 2 2 4 4 6 4 7 8 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busi	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code	
	it to this petition.		Check	k the appropriate box	to describe your business:	
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. §  18 you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor or a debtor or a debtor as defined by 11 U.S. C. § 1182(1)?		can set appropriate deadlines. If you indicate that you are a small business debt ochapter V, you must attach your most recent balance sheet, statement of opera the tax return or if any of these documents do not exist, follow the procedure in 11	or or itions,			
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		1, but I am NOT a small business debtor according to the definition in the Bankr	ruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Co d under Subchapter V of Chapter 11.	de, and
		☐ Yes.	I am f choos	iling under Chapter 1 e to proceed under 5	1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, Subchapter V of Chapter 11.	, and I
Pari	Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is	☐ Yes.				
	of imminent and	⊔ res.	What is	the hazard?		
	identifiable hazard to public health or safety?					
	Or do you own any		If income of	liate attention is		
	property that needs immediate attention?			why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	
					Hamber, Suret, Ony, State & Zip Sout	
				CONTROL OF THE PROPERTY OF THE		

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Debtor 1 Sharon Jean Logan

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

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

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

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

#### About Debtor 1:

You must check one:

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

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

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

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

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

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

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

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

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

Incapacity.

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

Disability.

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

Active duty.

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

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

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

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

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

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

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

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

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

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

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

	I am not required to receive a briefing about credit
107-124	counseling because of:

Incapacity.

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

Disability.

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

Active duty.

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

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

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Page 6 of 68 Case number (if known) Main Document Debtor 1 Sharon Jean Logan Answer These Questions for Reporting Purposes Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? □ No. Go to line 16b. Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 16b. money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses No. are paid that funds will be available for ☐ Yes distribution to unsecured creditors? **25,001-50,000** 18. How many Creditors do 1,000-5,000 1-49 you estimate that you □ 50,001-100,000 □ 5001-10,000 □ 50-99 owe? ☐ More than 100,000 10,001-25,000 100-199 200-999 19. How much do you ☐ \$1,000,001 - \$10 million \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your assets to ☐ \$10,000,001 - \$50 million \$1,000,000,001 - \$10 billion ☐ \$50,001 - \$100,000 be worth? \$10,000,000,001 - \$50 billion ☐ \$50,000,001 - \$100 million \$100,001 - \$500,000 ☐ More than \$50 billion ☐ \$100,000,001 - \$500 million ☐ \$500,001 - \$1 million ☐ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion 20. How much do you □ \$0 - \$50,000 □ \$1,000,000,001 - \$10 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 to be? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million \$100,001 - \$500,000 ☐ More than \$50 billion ☐ \$100,000,001 - \$500 million ☐ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Sharon Jean Logan Signature of Debtor 1 Executed on Executed on August 27, 2022 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Sharon Jean Logan

For your attorney, if you are represented by one

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

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

Signature of Attorney for Debtor

Date August 27, 2022

MM / DD / YYYY

Joseph Collier

Printed name

Law Office of Joseph Collier

Firm name

3154 Weldon Avenue

Los Angeles, CA 90065 Number, Street, City, State & ZIP Code

Contact phone (323) 286-3769

Email address

jcollier513@gmail.com

212828 CA Bar number & State

Voluntary Petition for Individuals Filing for Bankruptcy

# STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

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

On 04/01/1999, debtor filed a Chapter 7 bankruptcy case in the Central District of CA - Riverside Division (Case No. 6:99-bk-15620-MJ), and, on 07/15/1999, debtor received a discharge regarding the same.

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

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

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

		.com.		
I declare, und	er penalty of perjury, that t	he foregoing is true and correct	· \	
Executed at	Fountain Valley	, California.	Sharon Jean Logan	
Date:	August 27, 2022		Signature of Debtor 1	
			Signature of Debtor 2	

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Fill i	n this inforn	nation to identify your	Main Docum	nent Page 9 of 68		
Debt	tor 1	Sharon Jean Log	an			
Dahi	0	First Name	Middle Name	Last Name		
Debt (Spou	tor ∠ se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case	e number		3			
(if kno						k if this is an ded filing
Off	icial Fo	rm 106Sum				
			and Liabilities an	d Certain Statistical Information	8	12/15
inforr your	mation. Fill o original forn	out all of your schedule	es first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.		
					Your a Value	ssets of what you own
1.	Schedule A 1a. Copy line	/B: Property (Official Fo e 55, Total real estate, fr	orm 106A/B) om Schedule A/B		\$	0.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	36,277.97
	1c. Copy line	e 63, Total of all property	on Schedule A/B		\$	36,277.97
Part	2: Summ	arize Your Liabilities				
						abilities It you owe
			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	15,176.00
3.	Schedule E/ 3a. Copy th	F: Creditors Who Have e total claims from Part	Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	16,267.91
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	384,076.57
				Your total liabilities	\$	415,520.48
Part	3: Summa	arize Your Income and	Expenses			
4.		Your Income (Official Fo		I	\$	5,350.33
		Your Expenses (Official nonthly expenses from li			\$	5,493.59
Part	4: Answe	r These Questions for	Administrative and Stati	stical Records		
6.			er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with yo	ur other sc	hedules.
7.	Yes What kind o	of debt do you have?	965			
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Sharon Jean Logan

the court with your other schedules.

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 5,944.07

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

	Total	claim
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	16,267.91
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,267.91

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Main Document Fill in this information to identify your case and this filing: Debtor 1 Sharon Jean Logan First Name Middle Name Last Name Debtor 2 Middle Name Last Name First Name (Spouse, if filing) United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Check if this is an Case number amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3 1 Make: the amount of any secured claims on Schedule D: Trax Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2019 Year: Debtor 2 only Current value of the Current value of the 82,923 Approximate mileage: entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another LS Sport Utility 4D; Engine: \$12,280.00 \$12,280.00 4-Cyl, ECOTEC Turbo, 1.4 L ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$12,280.00 .pages you have attached for Part 2. Write that number here......>

Part 3: Describe Your Personal and Household Items

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

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

D	ebtor 1	Sharon Jean L	.ogan Main Document Page	e 12 of 68 Case number (if known)	
6.	<i>Exampl</i> □ No	30	nishings s, furniture, linens, china, kitchenware		
	Yes.	Describe			
			Miscellaneous Used Household Goods and Fu	rnishings	\$200.00
7.	□No	les: Televisions and	radios; audio, video, stereo, and digital equipment; con nones, cameras, media players, games	nputers, printers, scanners; music co	llections; electronic devices
			MacBook Air Laptop Computer, Apple iPhone Pad Tablet, and Brother Printer	13 Cell Phone, Apple	\$4,200.00
8.	Example No		gurines; paintings, prints, or other artwork; books, pictur s, memorabilia, collectibles	es, or other art objects; stamp, coin, o	or baseball card collections;
9.	Exampl	nent for sports and les: Sports, photogramusical instrum Describe	aphic, exercise, and other hobby equipment; bicycles, p	ool tables, golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
			Bicycle - Beach Cruiser		\$300.00
000	■ No □ Yes. Clothe Examp □ No	ples: Pistols, rifles, s  Describe	shotguns, ammunition, and related equipment less for the second s	ies	
			Clothing		\$7,500.00
12	□ No		lry, costume jewelry, engagement rings, wedding rings,	heirloom jewelry, watches, gems, go	ld, silver
			18k Gold Tiffany Necklace, 18k Gold Beaded E Gold Earrings, and Miscellaneous Used Costu		\$3,050.00
13	Exam <sub>l</sub> ■ No	arm animals  ples: Dogs, cats, bir  Describe	ds, horses		
14			nousehold items you did not already list, including a	any health aids you did not list	
		Give specific inform	nation		

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Debtor 1	Case 8:22-bk-11457-SC Sharon Jean Logan	Doc 1 Main Do	Filed 08/27/22 cument Page	Entered ( e 13 of 68 -	08/27/22 2 e number <i>(if kr</i>	20:00:3! nown)	5 Desc
	the dollar value of all of your entrie				have attache	d	\$15,250.00
Part 4: D	escribe Your Financial Assets						
SISSESSESSESSESSESSESSESSESSESSESSESSESS	own or have any legal or equitable in	nterest in any	of the following?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	nples: Money you have in your wallet,	RATION AND INCOME.		nd on hand wher	n you file your	petition	
				(	Cash on Ha	nd	\$20.00
Exam	sits of money  nples: Checking, savings, or other fina institutions. If you have multiple	ncial accounts; accounts with	; certificates of deposit; the same institution, list Institution name:	shares in credit t each.	unions, broke	rage house	s, and other similar
	17.1. <b>Checki</b> ı	ng	Chase Bank - Che ending in 2732	cking Accour	nt number		\$727.97
9. Non-r joint □ No	publicly traded stock and interests in venture  . Give specific information about there	n		27	_	terest in a	n LLC, partnership, and
	CA Non-Pro Rescue. Ba Protectors: kennels val	s and is CEC ofit Corporati isis for curre (1) the corpo ued at \$2,000 ish, and (3) t	O of of Paw Protecto ion, d/b/a Paw Prote ent value of Paw oration has 10 cage: 0, (2) the corporatio he website cost \$3,0	ors, a ectors s and n has	100	<b>%</b>	\$8,000.00
Nego Non-i ■ No	rnment and corporate bonds and of tiable instruments include personal ch negotiable instruments are those you . Give specific information about them Issuer name:	necks, cashiers cannot transfer	d checks, promissory no	ites, and money			
Exam ■ No	ement or pension accounts  apples: Interests in IRA, ERISA, Keogh,  List each account separately.  Type of account:		), thrift savings accounts Institution name:	s, or other pensi	on or profit-sh:	aring plans	

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Page 14 of 68 Main Document Case number (if known) Debtor 1 Sharon Jean Logan 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No. Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No. ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No. ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No. ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No.

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

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

Company name:

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

Beneficiary:

■ No

☐ Yes. Give specific information...

Surrender or refund

Page 15 of 68 Case number (if known) Main Document Debtor 1 Sharon Jean Logan 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$8,747.97 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 56. Part 2: Total vehicles, line 5 \$12,280.00 57. Part 3: Total personal and household items, line 15 \$15,250.00 58. Part 4: Total financial assets, line 36 \$8,747.97 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$36,277.97 Copy personal property total \$36,277.97 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$36,277.97

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Doc 1

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Fill in this infor	mation to identify your	case:		
Debtor 1	Sharon Jean Log	an		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	CENTRAL DISTRICT C	F CALIFORNIA	
Case number				
(if known)				☐ Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Identify the Property You Claim as I	Exempt				_
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.		
	You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Ame	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Miscellaneous Used Household Goods and Furnishings	\$200.00		\$200.00	C.C.P. § 703.140(b)(3)	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	MacBook Air Laptop Computer,	\$4,200.00		\$4,200.00	C.C.P. § 703.140(b)(3)	
	Apple iPhone 13 Cell Phone, Apple iPad Tablet, and Brother Printer Line from Schedule A/B: 7.1	3-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0		100% of fair market value, up to any applicable statutory limit		
	Bicycle - Beach Cruiser Line from Schedule A/B: 9.1	\$300.00		\$300.00	C.C.P. § 703.140(b)(5)	
	Line from Scriedule AVB: 9.1			100% of fair market value, up to any applicable statutory limit		
	Clothing Line from Schedule A/B: 11.1	\$7,500.00		\$7,500.00	C.C.P. § 703.140(b)(3)	
	Line from Scriedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit		
	18k Gold Tiffany Necklace, 18k Gold	\$3,050.00		\$1,900.00	C.C.P. § 703.140(b)(4)	
	Beaded Bracelet, 1 pair of 18k Gold Earrings, and Miscellaneous Used Costume Jewelry Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		

Debtor 1	r1 Sharon Jean Logan			Case number (if known)		
	description of the property and line on dedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Gold Tiffany Necklace, 18k Gold ded Bracelet, 1 pair of 18k Gold	\$3,050.00		\$1,150.00	C.C.P. § 703.140(b)(5)	
Ear Cos	Earrings, and Miscellaneous Used Costume Jewelry ine from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit		
	h on Hand from Schedule A/B: 16.1	\$20.00		\$20.00	C.C.P. § 703.140(b)(5)	
Line	Total Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit		
	ecking: Chase Bank - Checking count number ending in 2732	\$727.97		\$727.97	C.C.P. § 703.140(b)(5)	
	from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
1000 7000	otor owns and is CEO of of Paw tectors, a CA Non-Profit	\$8,000.00		\$8,000.00	C.C.P. § 703.140(b)(5)	
Cor Res Pav has \$2,0 in c	poration, d/b/a Paw Protectors cue. Basis for current value of Protectors: (1) the corporation 10 cages and kennels valued at 200, (2) the corporation has \$3,000 ash, and (3 from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit		
	you claiming a homestead exemption of ject to adjustment on 4/01/25 and every 3			led on or after the date of adjustmer	nt.)	

3.	Are you claiming a nomestead exemption of more than \$189,050?
	(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment
	■ No

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
  - ☐ No
  - ☐ Yes

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Main Document Page 18 of 68 Fill in this information to identify your case: Debtor 1 Sharon Jean Logan First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any AmeriCredit/GM 2.1 \$15,176.00 \$12,280.00 \$2,896.00 Describe the property that secures the claim: Financial Creditor's Name 2019 Chevrolet Trax 82,923 miles LS Sport Utility 4D; Engine: 4-Cyl, ECOTEC Turbo, 1.4 L As of the date you file, the claim is: Check all that Po Box 181145 apply. Arlington, TX 76096 ☐ Contingent Number, Street, City, State & Zip Code □ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Opened 08/19 Last

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.

Active

7/29/22

\$15,176.00 \$15,176.00

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

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

Last 4 digits of account number

3488

Date debt was incurred

Write that number here:

Filed 08/27/22 Entered 08/27/22 20:00:35 Case 8:22-bk-11457-SC Doc 1 Main Document Fill in this information to identify your case: Debtor 1 Sharon Jean Logan First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority Total claim amount amount 2.1 \$0.00 County of Orange Last 4 digits of account number 2434 \$6,285.47 \$6,285.47 Priority Creditor's Name P.O. Box 10260 When was the debt incurred? 06/12/2017 Santa Ana, CA 92711 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations At least one of the debtors and another

■ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

Case No. 16WF2434).

Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

On 06/12/2017, debtor was sentenced in a

criminal case and ordered to pay restitution to Greer Plumbing (Orange County Superior Court Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Dec Main Document Page 20 of 68 Case number (if known)

Debtor 1 Sharon Jean Logan 2.2 \$3,802.87 \$0.00 County of Orange Last 4 digits of account number 2434 \$3,802.87 Priority Creditor's Name When was the debt incurred? 06/12/2017 P.O. Box 10260 Santa Ana, CA 92711 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify On 06/12/2017, debtor was sentenced in a ☐ Yes criminal case and ordered to pay restitution to **RSM Plumbing (Orange County Superior Court** Case No. 16WF2434). 2.3 \$4,053.02 \$4,053.02 \$0.00 IRS Last 4 digits of account number 2673 Priority Creditor's Name Centralized Insolvency Operation When was the debt incurred? 10/15/2020 P.O. Box 21126 Philadelphia, PA 19114 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Unpaid Federal Income Taxes for Tax Year 2019 (including penalties and interest) 2.4 IRS \$136.55 \$0.00 Last 4 digits of account number 2673 \$136.55 Priority Creditor's Name Centralized Insolvency Operation When was the debt incurred? 10/15/2021 P.O. Box 21126 Philadelphia, PA 19114 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No. Other. Specify Unpaid Federal Income Taxes for Tax Year 2020 ☐ Yes (including penalties and interest)

Entered 08/27/22 20:00:35 Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Page 21 of 68 Case number (if known) Main Document Debtor 1 Sharon Jean Logan 2.5 \$1,990.00 \$0.00 Last 4 digits of account number 2673 \$1,990.00 Priority Creditor's Name Centralized Insolvency Operation When was the debt incurred? 08/2022 P.O. Box 21126 Philadelphia, PA 19114 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only □ Unliquidated ☐ Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Unpaid Federal Income Taxes for Tax Year 2021 (including penalties and interest) Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Amco Insurance Company Last 4 digits of account number 4133 \$0.00 Nonpriority Creditor's Name When was the debt incurred? c/o Jay Smith, Esq. 11/19/2010 6644 Valjean Ave., #200 Van Nuys, CA 91406 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

is the claim subject to offset?

debt

■ No

☐ Yes

At least one of the debtors and another

☐ Check if this claim is for a community

☐ Disputed

☐ Student loans

report as priority claims

Type of NONPRIORITY unsecured claim:

Other. Specify 30-2009-00324133)

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

On 11/19/2010, plaintiff Amco Insurance Co. obtained a default judgment against debtor (Orange County Superior Court Case No.

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

Debte	Sharon Jean Logan	and the second s	Case number (# known)	
4.2	Amco Insurance Company	Last 4 digits of account number	4133	\$9,404.10
	Nonpriority Creditor's Name One Nationwide Blvd. Columbus, OH 43215	When was the debt incurred?	11/19/2010	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	obtained a	010, plaintiff Amco Insurance Co. default judgment against debtor ounty Superior Court Case No. 324133)	
4.3	Amco Insurance Company	Last 4 digits of account number	4133	\$0.00
	Nonpriority Creditor's Name c/o Melissa DeKoven, Agent for SOP 2710 Gateway Oaks Drive, Suite 150N	When was the debt incurred?	11/19/2010	
	Sacramento, CA 95833  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecure  ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	obtained a	010, plaintiff Amco Insurance Co. default judgment against debtor ounty Superior Court Case No. 324133)	

Deptor	Snaron Jean Logan	,	Case number (in Nown)	
4.4	Brady Adam Price	Last 4 digits of account number	5865	\$3,135.00
	Nonpriority Creditor's Name c/o Estate of Brady Adam Price 26921 La Alameda, #3205 Mission Viejo, CA 92691	When was the debt incurred?	03/12/2013	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	Check if this claim is for a community debt is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	On 03/12/20 obtained a debtor (Ora	on 13, plaintiff Brady Adam Price small claims judgment against lange County Superior Court 3-2013-00625865-SC-SC-HLH)	
4.5	Caine & Weiner	Last 4 digits of account number	2656	\$125.00
	Nonpriority Creditor's Name Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411	When was the debt incurred?	Opened 05/21 Last Active 04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.6	Capital One	Last 4 digits of account number	3446	\$1,209.00
	Nonpriority Creditor's Name Attn: Bnakruptcy P.O. Box 30285	When was the debt incurred?	Opened 04/19 Last Active 08/22	
	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Credit Care	1	
	Charles Anna Charles Mark (Carlo)		Assistant T	

Debto	Sharon Jean Logan		Case number (if known)	
4.7	Central Portfolio Control	Last 4 digits of account number	3383	\$550.00
	Nonpriority Creditor's Name Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200 Minnetonka, MN 55343	When was the debt incurred?	Opened 07/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Collection	Attorney Comenity Bank	
4.8	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	5187	\$684.00
	Attn: Bankruptcy P.O. Box 790034	When was the debt incurred?	Opened 03/19 Last Active 2/12/20	
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Line	Secured	
4.9	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	1320	\$188.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 09/21 Last Active 06/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ ves	Other Specify Charge Ac	count	

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Page 25 of 68 Main Document Debtor 1 Sharon Jean Logan 4.1 0084 \$17,747.76 David C. Fee Last 4 digits of account number 0 Nonpriority Creditor's Name 03/28/2005 c/o Orange Capital Solutions When was the debt incurred? 40477 Murrieta Hot Spr Rd D1-389 Murrieta, CA 92563 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No. On 03/28/2005, plaintiff David Fee obtained a collections judgment against debtor (Riverside County Superior Court Case No. ☐ Yes Other. Specify RIS170084) 4.1 9104 \$10,802.00 First Credit Finance Last 4 digits of account number Nonpriority Creditor's Name Opened 08/14 Last Active 16005 Sherman Way 5/13/16 When was the debt incurred? Van Nuys, CA 91406 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated ☐ Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No. Other. Specify Automobile ☐ Yes 4.1 \$0.00 First Credit Finance Last 4 digits of account number Nonpriority Creditor's Name Opened 04/14 Last Active 16005 Sherman Way When was the debt incurred? 7/26/14 Van Nuys, CA 91406 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Automobile

No.

☐ Yes

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Debtor	1 Sharon Jean Logan	iain Documen	ı Page	Case number (if known)	
4.1	First Premier Bank	Last 4 digits of ac	count number	4884	\$539.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the deb	ot incurred?	Opened 10/15 Last Active 03/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you	file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations aris report as priority cla		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension	n or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify	Credit Caro		
4.1	Hanover Commercial Services, Inc.	Last 4 digits of ac	count number	2939	\$249,692.15
	Nonpriority Creditor's Name 1410 Third Street, Ste. 1 Riverside, CA 92507	When was the del	ot incurred?	04/20/2001	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you	ı file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIO	RITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations aris report as priority cla		ration agreement or divorce that you did not	
	No			g plans, and other similar debts	
	□ Yes	■ Other. Specify	On 04/20/20 Commercia collections	001, cross-complainant Hanover al Services, Inc. obtained a judgment against debtor Superior Court Case No.	

btor 1 Sharon Jean Logan			Case number (if known)	
Internal Revenue Service	Last 4 digits of acc	count number	2673	\$7,301.22
Nonpriority Creditor's Name Centralized Insolvency Operation P. O. Box 7346	When was the deb	t incurred?	10/15/2011	
Philadelphia, PA 19101-7346  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you	file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecured	i claim:	
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arisi report as priority cla		ration agreement or divorce that you did not	
■ No	☐ Debts to pension	n or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify	2010 (inclu- which said	leral Income Taxes for Tax Year ding penalties and interest), tax debt meets the requirements ge under applicable federal	
Internal Revenue Service	Last 4 digits of ac	count number	2673	\$3,820.35
Nonpriority Creditor's Name Centralized Insolvency Operation P. O. Box 7346	When was the deb	t incurred?	10/15/2012	
Philadelphia, PA 19101-7346  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you	file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations aris report as priority cla		ration agreement or divorce that you did not	
■ No	☐ Debts to pensio	n or profit-sharir	g plans, and other similar debts	
□Yes	■ Other. Specify	2011 (inclu which said	deral Income Taxes for Tax Year ding penalties and interest), tax debt meets the requirements ge under applicable federal	

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Internal Revenue Service	Last 4 digits of account number	2673	\$4,478.48
Nonpriority Creditor's Name Centralized Insolvency Operation P. O. Box 7346	When was the debt incurred?	10/15/2013	
Philadelphia, PA 19101-7346  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes		tax debt meets the requirements ge under applicable federal law.	
Kohls/Capital One	Last 4 digits of account number	8345	\$534.00
Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 07/15 Last Active 6/02/16	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
	☐ Contingent ☐ Unliquidated		
Debtor 1 only	250 C		
■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated	i claim:	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim: tration agreement or divorce that you did not	
■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	ration agreement or divorce that you did not	

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Debtor	1 Sharon Jean Logan		Case number (if known)					
4.1 9	Midland Funding, LLC	Last 4 digits of account number	3573	\$414.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 939069 San Diego, CA 92193 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim i	Opened 01/17 Last Active 06/16 s: Check all that apply					
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:					
	Check if this claim is for a community debt		☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts					
	No		7070					
	Yes	Other. Specify  Bank	Company Account Synchrony					
4.2	Nordstrom FSB	Last 4 digits of account number	3909	\$409.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6555	When was the debt incurred?	Opened 05/19 Last Active 05/21					
	Englewood, CO 80155  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify Credit Card						
4.2	Orange County Treasurer-Tax Collect	Last 4 digits of account number	8896	\$472.47				
	Nonpriority Creditor's Name County Service Center 601 North Ross Street	When was the debt incurred?	01/14/2020					
	Santa Ana, CA 92701  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans	at a state of the					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	Unsecured  ■ Other. Specify ESCAPE W						

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Debtor	1 Sharon Jean Logan		Case number (if known)					
4.2	Orange County Treasurer-Tax	Last 4 digits of account number	8931	\$502.30				
2	Collect Nonpriority Creditor's Name	Last 4 digits of account number						
	Tax Collector's Office	When was the debt incurred?	01/14/2020					
	12 Civic Center Plaza							
	Santa Ana, CA 92701	A - of the data was file the alaim i	a. Charle all that analy					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан that apply					
	A CONSTRUCTION OF A CONSTRUCTI							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	■ Other. Specify Unsecure F ESCAPE W	Property Tax Re: BUSINESS /INTEREST for Year 2009					
4.2	Quality Acceptance	Last 4 digits of account number	7542	\$15,021.00				
	Nonpriority Creditor's Name	<del></del>						
	14546 Hamlin Street	When was the debt incurred?	Opened 09/16 Last Active 5/24/17					
	3rd Floor Van Nuys, CA 91411	when was the debt incurred?	3/24/17					
	Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?							
	■ No	☐ Debts to pension or profit-sharir						
	Yes	Other. Specify Automobile	)					
4.2	Smile Brands Inc.	Last 4 digits of account number	4764	\$0.00				
	Nonpriority Creditor's Name		One and 02/22 Least Active					
	Attn: Bankruptcy 100 Spectrum Center Dr, Ste 1500	When was the debt incurred?	Opened 03/22 Last Active 07/22					
	Irvine, CA 92618	When was the dest mountain.	UII Z					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims	og plane, and other similar debte					
	■ No	☐ Debts to pension or profit-shari						
	□ vae	■ Other Specify Medical De	DI					

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Page 31 of 68 (if known) Debtor 1 Sharon Jean Logan 4.2 \$33,876.67 2673 State of CA Franchise Tax Board Last 4 digits of account number 5 Nonpriority Creditor's Name 10/15/1997 Personal Bankruptcy MS A340 When was the debt incurred? P.O. Box 2952 Sacramento, CA 95812 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No. Unpaid CA State Income Taxes for Tax Year 1996 (including penalties and interest), which said tax debt meets the requirements for discharge under applicable federal ☐ Yes Other. Specify bankruptcy law. 4.2 \$2,344.36 2673 State of CA Franchise Tax Board Last 4 digits of account number 6 Nonpriority Creditor's Name 10/15/1998 When was the debt incurred? Personal Bankruptcy MS A340 P.O. Box 2952 Sacramento, CA 95812 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated ☐ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No

> Unpaid CA State Income Taxes for Tax Year 1997 (including penalties and interest), which said tax debt meets the requirements for discharge under applicable federal

bankruptcy law.

☐ Yes

Other. Specify

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Debtor	1 Sharon Jean Logan	Main Document	Page	Case number (if known)	to be a second				
4.2	State of CA Franchise Tax Board	Last 4 digits of accor	unt number	2673	\$1,474.19				
	Nonpriority Creditor's Name Personal Bankruptcy MS A340	When was the debt in		10/15/2011					
	P.O. Box 2952 Sacramento, CA 95812 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you fil	e, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim: ☐ Student loans						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension of	r profit-sharin	g plans, and other similar debts					
	□Yes	_ 2 w fo	010 (inclu hich said	State Income Taxes for Tax Year ding penalties and interest), tax debt meets the requirements ge under applicable federal law.					
4.2 8	State of California - EDD  Nonpriority Creditor's Name	Last 4 digits of acco	unt number	4856	\$19,352.52				
	Benefit Overpayment Collection Section, MIC 91 P.O. Box 826218	When was the debt i	ncurred?	09/27/2013					
	Sacramento, CA 94230-6218  Number Street City State Zip Code	As of the date you fi	le, the claim	is: Check all that apply					
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated☐ Disputed☐							
	Debtor 1 and Debtor 2 only	Type of NONPRIORI	TY unsecure	d claim:					
	At least one of the debtors and another	☐ Student loans		505 5					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension of	☐ Debts to pension or profit-sharing plans, and other similar debts						
		- r _ (	EDD obta egarding non-fraud	at 09/27/2013, plaintiff State of CA ined a judgment against debtor EDD Benefit overpayment ) (Sup. Crt. of CA, Cty. of					
	Yes	Other. Specify	Sacrament	o Case No. 34-2013-90044856).					
Part 3	List Others to Be Notified About a D	ebt That You Already Lis	sted						
5. Use t is try have	his page only if you have others to be notified ving to collect from you for a debt you owe to more than one creditor for any of the debts t ied for any debts in Parts 1 or 2, do not fill ou	d about your bankruptcy, for someone else, list the origin hat you listed in Parts 1 or 2	a debt that	1 Parts 1 or 2, then list the collection agency	nere. Similarly, il you				
	and Address	On which entry in Part 1 or							
Attn:	oyment Development Dept. Wage Garnishment Box 989056	Line 4.28 of (Check one):		Part 1: Creditors with Priority Unsecured Clain Part 2: Creditors with Nonpriority Unsecured C					
	Sacramento, CA 95798-9056	Leat 4 digits of esseurt	mber	1052					
		Last 4 digits of account nur	er	1952					
Name	and Address	On which entry in Part 1 or		I list the original creditor?	ne ·				

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Desc

Debtor 1 Sharon Jean Logan

Minneapolis, MN 55439

Last 4 digits of account number

5187

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

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

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	16,267.91
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	16,267.91
				Total Claim
6f.	Student loans	6f.	\$	0.00
	Oliver and the state of the sta			
6g.		6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	384,076.57
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	384,076.57
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	<ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6d. 6e.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6e. \$ 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  6 b. \$ 6 c. \$ 6 c

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Main Document Page 34 of 68 Fill in this information to identify your case: Debtor 1 Sharon Jean Logan First Name Middle Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B). List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. State what the contract or lease is for Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code 2.1 Name Number Street State ZIP Code City 2.2 Name Number Street ZIP Code State City 2.3 Name Number Street State ZIP Code City 2.4

Name

Number

City

Name

Number

City

2.5

Street

Street

ZIP Code

ZIP Code

State

State

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Main Document Page 35 of 68 Fill in this information to identify your case: Debtor 1 Sharon Jean Logan Last Name First Name Middle Name Debtor 2 Last Name First Name Middle Name (Spouse if, filing) CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Addit onal Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) □ No. Go to line 3. ■ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ■ No ☐ Yes. . Fill in the name and current address of that person. In which community state or territory did you live? -NONE-Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Check all schedules that apply: Name, Number, Street, City, State and ZIP Code ☐ Schedule D, line 3.1 Name ☐ Schedule E/F, line ☐ Schedule G, line \_ Number Street ZIP Code City

Name

Number

City

Street

State

3.2

ZIP Code

☐ Schedule D, line

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

Filli	n this information	to identify your ca	ise:			ua d				
Deb	tor 1	Sharon Jean	Logan	(Annual III)						
	otor 2 use, if filing)	8 <del></del>				_				
Unit	ed States Bankru	ptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA						
Cas (If kn	e number			9	W. 1		Check if this is:  An amended  A suppleme  13 income a	nt showing	g postpetition of	chapter
Of	ficial Form	106 <u>l</u>					MM / DD/ Y	YYY		
Sc	chedule I:	Your Inco	ome							12/15
supp	olying correct inf use. If you are se th a separate she	formation. If you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any additi	ng jointly, and yo	our spouse clude infor	is liv matic	ng with you, inclu on about your spo	ide inform use. If mo	nation about y ore space is n	our eeded,
1.	Fill in your emp	oloyment		Debtor 1			Debtor 2	or non-fil	ing spouse	
		If you have more than one job,		■ Employed			☐ Emplo	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed  Office Manager			☐ Not er	☐ Not employed			
	employers.					Occupation				
	Include part-time self-employed w		Employer's name	Terry-Mudge	LLP					
	Occupation may or homemaker, i	include student if it applies.	Employer's address		1201 Dove Street, Ste. 625 Fountain Valley, CA 92708					
			How long employed t	here? 9 m	onths		<u> </u>			
Par	t 2: Give D	etails About Mor	nthiv income							
Esti		come as of the da	ate you file this form. If	you have nothing	to report for	any	ine, write \$0 in the	space. Inc	clude your non	-filing
		g spouse have mo separate sheet to	ore than one employer, co	ombine the inform	ation for all	empl	oyers for that perso	n on the lii	nes below. If y	ou need
							For Debtor 1		otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	5,944.07	\$	N/A	
3.	Estimate and li	st monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gros	s Income. Add lir	ne 2 + line 3.		4.	\$	5,944.07	\$	N/A	

Deb	tor 1	Sharon Jean Logan	2	(	Case	number (if kno	wn)				
					Foi	Debtor 1		48176574	Debtor		
	Cop	y line 4 here	4.		\$_	5,944.	07	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	508.	74	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$	0.	00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$	0.	00	\$		N/A	
	5e.	Insurance	5e		\$	85.	00	\$_		N/A	
	5f.	Domestic support obligations	5f.		\$	0.	00	\$_		N/A	,
	5g.	Union dues	5g		\$_		00	\$_		N/A	
	5h.	Other deductions. Specify:	5h	.+	\$_	0.	00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	593.	74	\$_		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,350.	33	\$_		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	00	\$		N/A	
	8b.	Interest and dividends	8b		\$	- Carlo	00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		.00	\$		N/A	
	8d.		80	ł.	\$	0.	00	\$		N/A	
	8e.	Social Security	8e	<b>.</b>	\$	0.	00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	e 8f 8g		\$		.00	\$_ \$		N/A N/A	
	8h.	Other monthly income. Specify:	81	1.+	\$	0.	.00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0	.00	s_		N/A	<u>\</u>
40	0-1	culate monthly income. Add line 7 + line 9.	10.	ç		5,350.33	+ \$		N/A	= \$	5,350.33
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	٠-		3,330.33			1007	-	0,000.00
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not include any amounts already included in lines 2-10 or amounts that are not excity:	r dep						Schedule 11.	₹ J.   +\$	0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The rete that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Cert</i> allies	sult is ain Lia	s the	e co ities	mbined mon and Related	thly i <i>Dat</i>	ncome a, if it	e. 12.	\$	5,350.33 ned ly income
13.	Do	you expect an increase or decrease within the year after you file this forr	n?							monui	, moonie
		No.				300					
		Yes Explain:									

FIII	in this information to identify your case:				
	otor 1 Sharon Jean Logan			k if this is: An amended filing	
	otor 2 ouse, if filing)				ing postpetition chapter he following date:
Unit	ted States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFO	ORNIA	-	MM / DD / YYYY	
20000000	nown)				
10000	fficial Form 106J				
Sc	chedule J: Your Expenses	rii dada ba	41		12/1
info	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	re filing together, bo form. On the top of	any additio	any responsible for anal pages, write ye	our name and case
Par					
1.	Is this a joint case?  ■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i> :	s for Separate Housel	<i>hold</i> of Debt	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and	Dependent's relation Debtor 1 or Debtor	2	Dependent's age	Does dependent live with you?
	Do not state the	Sub-hardware and inventory to the property of the sub-			□ No □ Yes
	dependents names.	***************************************			□ No
		-		9	☐ Yes ☐ No
					☐ Yes
		×			□ No
3.	Do your expenses include				☐ Yes
Э.	expenses of people other than yourself and your dependents?				
Est	t2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.	you are using this fo plemental Schedule	orm as a su J, check th	pplement in a Cha ne box at the top of	pter 13 case to report f the form and fill in the
the	clude expenses paid for with non-cash government assistance e value of such assistance and have included it on Schedule I: fficial Form 106l.)	if you know Your Income	MARK	Your expe	enses
4.	The rental or home ownership expenses for your residence, payments and any rent for the ground or lot.	Include first mortgage	4. \$	3	1,950.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	S	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	A STATE OF THE PROPERTY OF THE PARTY OF THE	0.00
	Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as h	ome equity loans	5. \$		0.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	r (if known)
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Sod and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ Childcare and children's education costs 10. Personal care products and services 11. Medical and dental expenses 11. Solution include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Insurance. 14. Charitable contributions and religious donations 15. Insurance. 16. Insurance. 17. Insurance. 18. Lealth insurance deducted from your pay or included in lines 4 or 20. 18. Life insurance 19. Vehicle insurance 19. Other insurance. Specify: 19. Installment or lease payments: 17. Car payments for Vehicle 2 17. Cother. Specify: 17. Cother. Specify: 17. Cother. Specify: 18. Your payments of vehicle 2 17. Cother. Specify: 17. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 19. Other specify: 10. Other specify: 10. Other specify: 11. Secify: 12. Specify: Monthly Support for Debtor's Mother 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 21. Other: Specify: 22c. Add line 22a and 22b. The result is your monthly expenses. 23c. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Specify: Unater Property expenses for Debtor's Mother 23c. Subtract your monthly expenses from line 22	
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other, Specify; 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Sc. Clothing, laundry, and laundry, l	250.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Services 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, specify: 15d. \$ 17a. Car payment Plan 17a. Car payments for Vehicle 1 17b. Car payments of Vehicle 1 17c. Str. Other. Specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments on their property expenses not included in lines 4 or 5 of this form or on Schedule I: Your 20a. Mortgages on other property 20a. \$ 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Planet Fitness Membership Skin Laundry Membership Skin Laundry Membership 22. Calculate your monthly expenses for Debtor's Mortgan Schedule I. 23a. \$ 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The	0.00
6d. Other. Specify:  7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. S 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. 15. Insurance. 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15b. Lelathi insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. S 1	
7. Food and housekeeping supplies 8. Childcare and children's aducation costs 9. Clothing, laundry, and dry cleaning 9. \$ \$ 10. Personal care products and services 11. Medical and dental expenses 12. Transportation, Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: IRS Payment Plan 17. Installment or lease payments: 17a. Car payments for Vehicle 2 17b. \$ 17c. Other. Specify: 17c. Other. Specify: 17d. Other symments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: Monthly Support for Debtor's Mother 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Section of the property 22c. Add lines 4 through 21. 22b. Copy line 22 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income	0.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car progrements. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: IRS Payment Plan 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments or unake to support others who do not live with you. Specify: Monthly Support for Debtor's Mother 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 22a. Add lines 4 through 21. 22b. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly pret income.	500.00
9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S. 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. So the contributions and religious donations 15. Insurance. 15d. Other insurance. Specify: 15d. So the contribution of the contribution	
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11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: IRS Payment Plan 16. \$ 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: Monthly Support for Debtor's Mother 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your 20a. Mortgages on other property 20a. Second Maintenance, repair, and upkeep expenses 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Planet Fitness Membership Skin Laundry Membership 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly net income.	300.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not Include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15c. Specify: IRS Payment Plan 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other specify: 17d.	0.00
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24. Do you expect an increase or decrease in your expenses within the year after you file this fo	-143.26
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage paying modification to the terms of your mortgage?	orm? yment to increase or decrease because of a
No.	
Yes. Explain here:	

Schedule J: Your Expenses

page 2

Official Form 106J

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Fill in this infor	mation to identify your	case:				
Debtor 1	Sharon Jean Log	an Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	CENTRAL DISTRIC	OF CALIFORNIA			
Case number (if known)					Check if this is an amended filing	
Official Form		an Individua	al Debtor's S	Schedules		12/15
If two married p	eople are filing togethe	r, both are equally res	ponsible for supplying o	correct information.		
obtaining mone	is form whenever you f y or property by fraud i I8 U.S.C. §§ 152, 1341,	n connection with a b	iles or amended schedu ankruptcy case can resu	les. Making a false st ult in fines up to \$250,	atement, concealing property, ,000, or imprisonment for up to	or > 20
Sig	n Below					
Did you pa	ay or agree to pay some	eone who is NOT an a	torney to help you fill ou	ut bankruptcy forms?		
■ No						
☐ Yes.	Name of person			Attach Be Declarati	ankruptcy Petition Preparer's No ion, and Signature (Official Form	tice, 119)
that they ar	alty of perjury, I declare re true and correct.		ummary and schedules	filed with this declara	ation and	
	n Jean Logan ure of Debtor 1			e of Debtor 2		
Date	August 27, 2022		Date			

Date August 27, 2022

-	en a constante que recina					
11	I in this informa	ation to identify your	case:			
De	ebtor 1	Sharon Jean Log	gan Middle Name	Last Name		
De	ebtor 2	1 #3t Namo	imade (teme	101520030000000		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Bank	kruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA		
1000	ase number					Check if this is an amended filing
_	fficial For		Affairs for Individ	duals Filing for B	ankruptcy	04/2:
Be	as complete an ormation. If mo	nd accurate as possi	ble. If two married people a attach a separate sheet to	are filing together, both are	equally responsible for sup additional pages, write you	plying correct ur name and case
Pa	art 1: Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married					
	Not marri	ied				
2.	During the las	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
		all of the places you l	ved in the last 3 years. Do n	ot include where you live nov	i.	
	Debtor 1:		Dates Debtor 1 lived there			Dates Debtor 2 lived there
	8670 Dresd Rancho Cu	len Court camonga, CA 917	From-To: 01 03/2019 - 07/2	Same as Debtor	1	☐ Same as Debtor 1 From-To:
	■ No □ Yes. Mak	s include Arizona, Ca	lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (O	evada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	y? (Community property Visconsin.)
4.	Fill in the total	amount of income vo	u received from all jobs and	ng a business during this y all businesses, including part re together, list it only once u	ear or the two previous cale -time activities. nder Debtor 1.	endar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$41,913.23	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Debtor 1 Sharon Jean Logan

	Debtor 1		Debtor 2			
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2021 )	■ Wages, commissions, bonuses, tips	\$9,772.00	☐ Wages, commission bonuses, tips	s,		
	☐ Operating a business		☐ Operating a busines	s		
For the calendar year before that: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commission bonuses, tips	s,		
	☐ Operating a business		☐ Operating a busines	S		
winnings. If you are filing a joint of List each source and the gross in No  Yes. Fill in the details.	come from each source separat	tely. Do not include income the		Gross income		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2021)	EDD - Unemployment Benefits	\$21,564.00		1		
For the calendar year before that: (January 1 to December 31, 2020)	EDD - Unemployment Benefits	\$24,259.00				
Part 3: List Certain Payments Yo	ou Made Before You Filed for	Bankruptcy				
<ol> <li>Are either Debtor 1's or Debtor</li> <li>No. Neither Debtor 1 noi individual primarily for</li> </ol>	2's debts primarily consume r Debtor 2 has primarily consu r a personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C.	§ 101(8) as "incurred by an		
	efore you filed for bankruptcy, di	id you pay any creditor a tota	I of \$7,575* or more?			
☐ No. Go to line ☐ Yes List below	e 7. v each creditor to whom you pai	id a total of \$7 575* or more	in one or more navments	and the total amount you		
paid that not include	creditor. Do not include paymer de payments to an attorney for t ent on 4/01/25 and every 3 year	nts for domestic support oblig his bankruptcy case.	gations, such as child supp	port and alimony. Also, do		
Yes. Debtor 1 or Debtor 2  During the 90 days be	or both have primarily consu efore you filed for bankruptcy, d	umer debts. id you pay any creditor a tota	al of \$600 or more?			
■ No. Go to line	e 7.					
☐ Yes List below include p	w each creditor to whom you pa ayments for domestic support o for this bankruptcy case.	id a total of \$600 or more and obligations, such as child sup	d the total amount you pai port and alimony. Also, do	d that creditor. Do not o not include payments to ar		
Creditor's Name and Address	Dates of payme	ent Total amount paid	Amount you Was still owe	this payment for		

		Case 8:22-bk-11457-SC	Doc 1 Filed 08/2 Main Document			d 08/27/22	20:00:35	Desc
Debte	or 1	Sharon Jean Logan			Case	number (if known)		and the se
I. c	nside	in 1 year before you filed for bankrupt ers include your relatives; any general p lich you are an officer, director, person in siness you operate as a sole proprietor.	artners; relatives of any gene n control, or owner of 20% or	eral partne r more of th	rs; partners heir voting	ships of which you securities; and ar	u are a general ny managing ag	partner; corporation ent, including one fo
[	⊐	No Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total ar	mount paid	Amount you still owe	Reason for t	nis payment
i	nsid	in 1 year before you filed for bankrup ler? de payments on debts guaranteed or co		nents or t	ransfer an	y property on a	ccount of a del	ot that benefited an
-	]	No Yes. List all payments to an insider der's Name and Address	Dates of payment	Total ar	mount	Amount you	Reason for t	
					paid	still owe	Include credit	or's name
9. \ I I	<b>Vith</b> _ist a modi	in 1 year before you filed for bankrup all such matters, including personal injury fications, and contract disputes.  No Yes, Fill in the details.	tcv. were you a party in an	y lawsuit, s, divorces	court acti , collection	on, or administr suits, paternity a	ative proceedi ctions, support	ng? or custody
	Cas	e title	Nature of the case	Court o	r agency		Status of the	case
10.	With	e number  in 1 year before you filed for bankrup  ck all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.	ow.	rty repos	sessed, fo		hed, attached,	
	Cre	ditor Name and Address	Describe the Property  Explain what happened	i		Date		Value of the property
	With acco	nin 90 days before you filed for bankru ounts or refuse to make a payment be No Yes. Fill in the details.	uptcy, did any creditor, inc cause you owed a debt?	luding a b	ank or fina	ancial institutior	ı, set off any aı	mounts from your
	Cre	ditor Name and Address	Describe the action the	creditor	took	Date taker	action was 1	Amoun
12.	With	nin 1 year before you filed for bankrup rt-appointed receiver, a custodian, or	otcy, was any of your prope another official?	erty in the	possessio	on of an assigne	e for the bene	fit of creditors, a
		No Yes						
Part	5:	List Certain Gifts and Contributions	3			and the second s		
	With ■ □	nin 2 years before you filed for bankru No Yes. Fill in the details for each gift.	ıptcy, did you give any gift	s with a to	otal value o	of more than \$60	00 per person?	
		ts with a total value of more than \$600 person	Describe the gifts			Date the g	s you gave jifts	Value
	- 20 - 35	rson to Whom You Gave the Gift and dress:						

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?   No	Deb	otor 1	Case 8:22-bk-11457-SC Sharon Jean Logan	Doc 1 Filed 08/2 Main Document	27/22 Entere Page 44 of 6	d 08/27/22 20:00:35 8 number (if known)	Desc
No	Doc		Onaron ocan Logan	110000	STATE OF THE STATE		
Gifts or contributions to charities that total more than \$500 Charity's Name Address (Pumers than \$500 Charity's Name A	14.		No		s or contributions wi	th a total value of more than \$	600 to any charity?
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?  No Yes. Fill in the details. Describe the property you lost and Include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include any property.  Part 7: List Certain Payments or Transfers  16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any atteneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No Yes, Fill in the details. Person Who Was Pald Description and value of any property Date payment or transfer was made transferred Who Made the Payment, if Not You Law Office of Joseph Collier Attorney Fees Attorney Fees 08/26/2022 \$1,162.00 and Address Person Who Made the Payment, if Not You Law Office of Joseph Collier Attorney Fees 08/26/2022 \$1,162.00 and Vees, Fill in the details. Person Who Was Pald Description and value of any property Date payment or transfer any property Do not include any payment or transfer that you listed on line 16.  No Yes, Fill in the details. Person Who Was Pald Description and value of any property Date payment or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transfer was made  18. Within 2 years before you filed for bankruptcy file you sell, trade, or otherwise transfer any property to anyone, other transfer was made  19. No Yes, Fill in the details. Person Who Rocelved Transfer was and transfers made as security (such as the granting of a		moi	s or contributions to charities that tre than \$600 arity's Name	otal Describe what you	ı contributed		Value
No	Par	t 6:	List Certain Losses	10.11.00.00000000			100.000
Yes. Fill in the details.   Describe the property you lost and how the loss occurred   Describe any insurance coverage for the loss   Date of your   Describe the property   Describe the property   Describe any insurance dalms on line 33 of Schedule A/B: Property.    Port 7: List Certain Payments or Transfers	15.			ptcy or since you filed for b	ankruptcy, did you l	ose anything because of theft	, fire, other disaster
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No  Yes, Fill in the details.  Person Who Was Paid Address Bemail or website address Person Who Made the Payment, if Not You Law Office of Joseph Collier Attorney Fees 08/26/2022 \$1,162.00  Attorney Fees 08/26/2022 \$1,162.00  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes, Fill in the details.  Person Who Was Paid Address Description and value of any property Date payment or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and teas security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes, Fill in the details.  Person Who Received Transfer		Des	Yes. Fill in the details. scribe the property you lost and	Include the amount that insu	rance has paid. List p	ending loss	
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No  Yes, Fill in the details.  Person Who Was Paid Address Bemail or website address Person Who Made the Payment, if Not You Law Office of Joseph Collier Attorney Fees 08/26/2022 \$1,162.00  Attorney Fees 08/26/2022 \$1,162.00  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes, Fill in the details.  Person Who Was Paid Address Description and value of any property Date payment or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and teas security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes, Fill in the details.  Person Who Received Transfer	Par	t 7:	List Certain Payments or Transfers	S			
Person Who Was Paid Address Email or website address Email or website address Person Who Made the Payment, if Not You Law Office of Joseph Collier Attorney Fees 3154 Weldon Avenue Los Angeles, CA 90065 jcollier\$13@gmail.com  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details. Person Who Was Paid Address  Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details. Person Who Received Transfer Description and value of payment and property or payments received or debts paid in exchange	16.	cons	sulted about seeking bankruptcy or i	preparing a bankruptcy pet	ition?		ty to anyone you
Person Who Was Paid Address Email or website address Email or website address Person Who Made the Payment, if Not You Law Office of Joseph Collier 3154 Weldon Avenue Los Angeles, CA 90065 jcollier513@gmail.com  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details. Person Who Was Paid Address  No Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details. Person Who Received Transfer Description and value of payments received or debts paid in exchange			10.400				
Law Office of Joseph Collier 3154 Weldon Avenue Los Angeles, CA 90065 jcollier513@gmail.com  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Person Who Was Paid Address Description and value of any property Date payment or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Description and value of payments received or debts paid in exchange		Add Em	son Who Was Paid dress ail or website address	transferred	alue of any property	or transfer was	
promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Person Who Was Paid Address Description and value of any property Address Date payment or transfer was payment or transfer was payment made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Description and value of payments received or debts paid in exchange  Date transfer was made		Lav 318 Los	w Office of Joseph Collier 54 Weldon Avenue s Angeles, CA 90065			08/26/2022	\$1,162.00
Yes. Fill in the details.  Person Who Was Paid Description and value of any property or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Description and value of payments received or debts paid in exchange	17.	pror	mised to help you deal with your cre-	ditors or to make payments	e acting on your bel to your creditors?	nalf pay or transfer any proper	ty to anyone who
Person Who Was Paid Address  Description and value of any property or transfer was made  No  Yes. Fill in the details.  Person Who Received Transfer  Description and value of any property transferred  Description and value of any property to anyone, other than property transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Person Who Received Transfer  Description and value of payments received or debts paid in exchange  Date transfer was made		<b>*</b>	No				
Address transferred or transfer was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Person Who Received Transfer  Description and value of payments received or debts paid in exchange  Date transfer was made		5000 III.				Data novment	Amount of
transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Address Description and value of payments received or debts paid in exchange Date transfer was made					alue of any property	or transfer was	
Yes. Fill in the details.  Person Who Received Transfer Address  Description and value of property transferred property transferred  Describe any property or payments received or debts paid in exchange  Date transfer was payments received or debts paid in exchange	18.	tran	sferred in the ordinary course of you ude both outright transfers and transfer	ur business or financial affa s made as security (such as t	t <b>irs?</b> he granting of a secur		
Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange			10-10-10-10-10-10-10-10-10-10-10-10-10-1				
paid in exchange		Per	rson Who Received Transfer				
			oress rson's relationship to you	property transfer			

Case 8:22-bk-11457-SC Doc 1 Filed 08/27/22 Entered 08/27/22 20:00:35 Page 45 of 68 Case number (if known) Main Document Debtor 1 Sharon Jean Logan 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No ☐ Yes. Fill in the details. Date Transfer was Description and value of the property transferred Name of trust made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Date account was Last balance Type of account or Name of Financial Institution and Last 4 digits of instrument closed, sold, before closing or account number Address (Number, Street, City, State and ZIP transfer moved, or Code) transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Do you still Describe the contents Who else had access to it? Name of Financial Institution have it? Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Describe the contents Name of Storage Facility Who else has or had access have it? to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Value Describe the property Where is the property? Owner's Name (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)

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

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

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

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

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

Yes. Fill in the details below.

Name

Date Issued

(Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result In fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sharon Jean Logan
Signature of Debtor 2

Date August 27, 2022

Date

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

No

Yes

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

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

Main Document

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Debtor 1 Sharon Jean Logan

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	-t: A - !:ltiE		processing to the second se			
FIII IN this inform	ation to identify your	.ase.	with the same of	NAME OF TAXABLE PARTY.		
Debtor 1	Sharon Jean Loga			Last Nama	-	
D-ld0	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name	-	
United States Ban	kruptcy Court for the:	CENTRAL DISTR	ICT OF CALI	FORNIA	_	
Case number						
(if known)						Check if this is an amended filing
Official For	m 108					
Statemen	t of Intentio	n for Indiv	riduals	Filing Under Cha	pter 7	12/15
creditors have	claims secured by yo	ur property, or		n if:		
You must file this whichev	form with the court w er is earlier, unless th	ithin 30 days after	vou file vour	bankruptcy petition or by the dause. You must also send copies	ate set for the m to the creditors	neeting of creditors, and lessors you list
		r in a joint case, bo	th are equall	y responsible for supplying corr	rect information	. Both debtors must
			s needed, atta	ach a separate sheet to this forn	n. On the top of	any additional pages,
Part 1: List Yo	First Name					
		art 1 of Schedule D	: Creditors V	/ho Have Claims Secured by Pro	operty (Official I	Form 106D), fill in the
		hat is collateral				
Creditor's Ar	neriCredit/GM Fina	ncial	☐ Surreno	er the property.	■ 1	No.
name:			☐ Retain	the property and redeem it.		
TO A COUNTY OF THE STATE OF THE		ax 82,923	Reaffin	mation Agreement.		'es
property securing debt:	LS Sport Utility 4D		— Retain t	ne property and [explain].		
Part 2: List Yo	ur Unexpired Persona	I Property Leases				
For any unexpired in the information	d personal property le below. Do not list rea	ase that you listed al estate leases. Un	expired leas	es are leases that are still in effe	ect; the lease pe	(Official Form 106G), fill riod has not yet ended.
		a and a second s				lease be assumed?
Lessor's name:					□ No	
Description of lease Property:	sed				☐ Yes	
Lessor's name:					□ No	
Description of lease Property:	sea				☐ Yes	

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Debtor 1 Sharon Jean Logan	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below  Under penalty of perjury, I declare that I have indicated my intention abproperty that is subject to an unexpired lease.  X Sharon Jean Logan Signature of Debtor	out any property of my estate that secures a debt and any personal  X Signature of Debtor 2
Date August 27, 2022	Date

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Central District of California

In re	Sharon Jean Logan		Case No.	
	<u> </u>	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)
С	fursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		s	1,162.00
	Prior to the filing of this statement I have received		s	1,162.00
	Balance Due		\$	0.00
2. \$	338.00 of the filing fee has been paid.			
3. Т	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. i	I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.
ı	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na	sation with a person or persons ames of the people sharing in the	who are not members e compensation is atta	or associates of my law firm. A sched.
6. I	in return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ts of the bankruptcy	ease, including:
t	Analysis of the debtor's financial situation, and rend preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] Discussion, review and execution (as a	atement of affairs and plan which tors and confirmation hearing, a	h may be required; nd any adjourned hea	rings thereof;
7. I	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.	ee does not include the followin ischargeability actions, jud	g service: icial lien avoidanc	es, relief from stay actions or
		CERTIFICATION		
this b	certify that the foregoing is a complete statement of a ankruptcy proceeding.	ny agreement or arrangement fo	or payment to me for r	epresentation of the debtor(s) in
	ugust 27, 2022	Joseph Collier		
D	ate	Signature of Attorn Law Office of Jo 3154 Weldon Av Los Angeles, CA	seph Collier enue \ 90065 Fax: (323) 402-696	1

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Fill in this information to identify your case:	Check one box only as directed in this form and in Form 122A-1Supp:	
Debtor 1 Sharon Jean Logan	1227-13dpp.	Æ
Debtor 2 (Spouse, if filing)	☐ 1. There is no presumption of abuse	
United States Bankruptcy Court for the: Central District of California	2. The calculation to determine if a presumption of abus applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).	se
Case number		
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.	
	☐ Check if this is an amended filing	
Official Form 122A - 1		
Chapter 7 Statement of Your Current Monthly	y Income 12	/19
Be as complete and accurate as possible. If two married people are filing together, both a attach a separate sheet to this form. Include the line number to which the additional infor case number (if known). If you believe that you are exempted from a presumption of abus qualifying military service, complete and file Statement of Exemption from Presumption of Part 1:  Calculate Your Current Monthly Income  1. What is your marital and filing status? Check one only.	mation applies. On the top of any additional pages, write your name a se because you do not have primarily consumer debts or because of	nd
■ Not married, Fill out Column A, lines 2-11.		
☐ Married and your spouse is filing with you. Fill out both Columns A and	B. lines 2-11.	
☐ Married and your spouse is NOT filing with you. You and your spouse		
☐ Living in the same household and are not legally separated. Fill out		
☐ Living separately or are legally separated. Fill out Column A, lines 2-1 penalty of perjury that you and your spouse are legally separated under living apart for reasons that do not include evading the Means Test requ	1; do not fill out Column B. By checking this box, you declare under nonbankruptcy law that applies or that you and your spouse are	er
Fill in the average monthly income that you received from all sources, derived during 101(10A). For example, if you are filing on September 15, the 6-month period would be Mark the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do spouses own the same rental property, put the income from that property in one column only	ch 1 through August 31. If the amount of your monthly income varied during not include any income amount more than once. For example, if both	,
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
<ol><li>Your gross wages, salary, tips, bonuses, overtime, and commissions (be payroll deductions).</li></ol>	sfore all \$\$	
<ol> <li>Alimony and maintenance payments. Do not include payments from a spou Column B is filled in.</li> </ol>	\$	
4. All amounts from any source which are regularly paid for household exp of you or your dependents, including child support. Include regular contrib from an unmarried partner, members of your household, your dependents, par and roommates. Include regular contributions from a spouse only if Column B filled in. Do not include payments you listed on line 3.	butions rents,	
5. Net income from operating a business, profession, or farm		
Debtor 1  Cross receipts (hefers all deductions) \$ 0.00		
Gross receipts (before all deductions)		
Ordinary and necessary operating expenses -\$ 0.00  Net monthly income from a business, profession, or farm \$ 0.00 Copy	here -> \$ 0.00 \$	
6. Net income from rental and other real property		
Debtor 1		
Gross receipts (before all deductions) \$ 0.00		
Ordinary and necessary operating expenses -\$ 0.00	2000 8 4	
Net monthly income from rental or other real property \$ Copy	CONTROL 19 10 10 10 10 10 10 10 10 10 10 10 10 10	
7. Interest, dividends, and royalties	\$\$	

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Case number (if known)

Debtor	Sharon Jean Logan	Case number (if known)	
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Ω	Unemployment compensation	\$ 0.00	\$
	Do not enter the amount if you contend that the amount received was a benefit under		
	the Social Security Act. Instead, list it here:		
	For you \$ 0.00 For your spouse \$		
	For your spouse \$		
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00	\$
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below		
		\$ 0.00	\$
		\$ 0.00	\$
	Total amounts from separate pages, if any. +	\$0.00	\$
	each column. Then add the total for Column A to the total for Column B.	5,944.07 + \$	Total current monthly Income
Part			
12.	Calculate your current monthly income for the year. Follow these steps:	0	S 5 044 07
	12a. Copy your total current monthly income from line 11	Copy line 11 r	sssssssss
	Multiply by 12 (the number of months in a year)		x 12
	12b. The result is your annual income for this part of the form		12b. \$
13.	Calculate the median family income that applies to you. Follow these steps:		
	Fill in the state in which you live.		
	Fill in the number of people in your household.		65.005.00
	Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office.	in the separate instruc	13. \$ 65,895.00 tions
14.	How do the lines compare?		
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3. Do NOT fill out or file Official Form 122A-2.	x 1, There is no presun	nption of abuse.
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, The price of the page 1, check box 2, The price of	resumption of abuse is	determined by Form 122A-2.
Pari	3: Sign Below		
	By signing here, I declare under penalty of perjury that the information on this st	tatement and in any att	achments is true and correct.
	X Sharon Jean Logan		
1	Signature of Debtor 1		

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Debtor 1 Sharon Jean Logan

Case number (if known)

Date August 27, 2022

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Sharon Jean Logan  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: Central District of California  Case number	Check the appropriate box as directed in lines 40 or 42:  According to the calculations required by this Statement:  1. There is no presumption of abuse.
(if known)	☐ Check if this is an amended filing
Official Form 122A - 2 Chapter 7 Means Test Calculation	04/22
To fill out this form, you will need your completed copy of Chapter 7 Statemen  Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, include the line number additional pages, write your name and case number (if known).  Part 1: Determine Your Adjusted Income	ther, both are equally responsible for being accurate. If more
Copy your total current monthly income.  Copy line 11 from	om Official Form 122A-1 here=> \$ 5,944.07
<ol> <li>Did you fill out Column B in Part 1 of Form 122A-1?</li> <li>No. Fill in S0 for the total on line 3.</li> <li>Yes. Is your spouse Filing with you?</li> <li>No. Go to line 3.</li> <li>Yes. Fill in \$0 for the total on line 3.</li> <li>Adjust your current monthly income by subtracting any part of your sporhousehold expenses of you or your dependents. Follow these steps:</li> <li>On line 11, Column B of Form 122A-1, was any amount of the income you repexpenses of you or your dependents?</li> </ol>	
No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:  State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.  Total.	Fill in the amount you are subtracting from your spouse's income   \$  \$  \$  \$  Copy total here=> \$0.00
Adjust your current monthly income. Subtract line 3 from line 1.	s5,944.07

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ebtor 1	Sharon Jean Logan			Case number (if kno	wn)		
art 2:	Calculate Your Deductions from Your Income				4214 544 555 555 555 555		Year Secret land of the
to ans	ternal Revenue Service (IRS) issues National and wer the questions in lines 6-15. To find the IRS sta ctions for this form. This information may also be	andards, go oi	nline using	the link specified		mounts	
your a	t the expense amounts set out in lines 6-15 regardles ctual expenses if they are higher than the standards. e in line 3 and do not deduct any operating expenses	Do not deduct a	any amoun	ts that you subtracte	d from your spou	se's	
If your	expenses differ from month to month, enter the average	ige expense.					
When	ever this part of the from refers to you, it means both y	ou and your sp	ouse if Co	lumn B of Form 122/	A-1 is filled in.		
5. T	he number of people used in determining your de	ductions from	income				
р	ill in the number of people who could be claimed as e lus the number of any additional dependents whom yo ne number of people in your household.	xemptions on y ou support. This	our federa s number r	income tax return, nay be different from	1		
Natio	nal Standards You must use the IRS Nation	al Standards to	answer th	e questions in lines	6-7.		
	ood, clothing, and other items: Using the number of tandards, fill in the dollar amount for food, clothing, an		ntered in lir	e 5 and the IRS Nat	ional	\$	785.00
ti P	Out-of-pocket health care allowance: Using the number dollar amount for out-of-pocket health care. The number open who are 65 or older-because older people havingher than this IRS amount, you may deduct the addit	mber of people e a higher IRS	is split into allowance	two categoriespe	ople who are und	er 65 and	;
Peopl	e who are under 65 years of age						
7	a. Out-of-pocket health care allowance per person	\$7	5.00				
7	b. Number of people who are under 65	X	1_				
7	c. Subtotal. Multiply line 7a by line 7b.	\$7	5.00	Copy here=>	\$ 75.00	<u>)</u>	
Peopl	e who are 65 years of age or older						
7	d. Out-of-pocket health care allowance per person	\$15	3.00				
7	e. Number of people who are 65 or older	x	0				
7	f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	+\$ 0.00	)	

7g. Total. Add lines 7c and 7f

75.00

Copy total here=> \$

75.00

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Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Debtor 1 Sharon Jean Logan

Case number (if known)

\$13.00 AT	4-36-55		SCHOOL SECTION OF THE PROPERTY OF THE	SCHOOL SECTION	CONTRACTOR AND	98572-942-07-02-400-04	A MARKET STATES OF S	SPACE CALL SPACE COUNTY	Village State Service
		n information from the IRS, the U.S. Trustee Program ccy purposes into two parts:	has divided th	e IRS Lo	ocal Standar	d for hous	ing for		
_		ng and utilities - Insurance and operating expenses							
H	lousi	ng and utilities - Mortgage or rent expenses							
To a	nsw	er the questions in lines 8-9, use the U.S. Trustee Pro	ogram chart.						
		e chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	instructions for	this form	l.				
8.		sing and utilities - Insurance and operating expense e dollar amount listed for your county for insurance and o					e 5, fill \$		577.00
9.	Hou	sing and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses				\$ 2	2,227.00		
	9b.	Total average monthly payment for all mortgages and o	ther debts secu	red by yo	our home.				
		To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 months for bankruptcy. Then divide by 60.	l amounts that a nths after you fil	re e					
		Name of the creditor	Average mor payment	ithly					
		-NONE-	\$						
		Total average monthly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	5
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from I or rent expense). If this amount is less than \$0, enter \$0	ine 9a ( <i>mortgag</i> )	e 	\$	2,227.00	Copy here=>	· \$	2,227.00
10.		ou claim that the U.S. Trustee Program's division of t cts the calculation of your monthly expenses, fill in a				is incorred	t and	\$	0.00
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of vehi	cles for which yo	ou claim	an ownership	o or operation	ng expense		
		). Go to line 14.							
		. Go to line 12.							
		or more. Go to line 12.							
12.	Veh ope	icle operation expense: Using the IRS Local Standard rating expenses, fill in the Operating Costs that apply for	s and the number your Census re	er of vehi gion or n	cles for whic netropolitan s	h you claim statistical ar	the ea.	\$	375.00

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Case number (if known)

15	Vehicle ownership or lease ex You may not claim the expense more than two vehicles.	pense: Using the IRS Local if you do not make any loan	Standards or lease pa	s, calculate the ayments on th	e net owner e vehicle.	ship or lease e In addition, you	xpense for each may not claim t	vehicle below. he expense for
Veh	icle 1 Describe Vehicle 1:	2019 Chevrolet Trax 82 4-Cyl, ECOTEC Turbo,		es LS Sport	Utility 4D	); Engine:		
13a.	Ownership or leasing costs usin	g IRS Local Standard			\$	588.00		
	Average monthly payment for all Do not include costs for leased		•					
	To calculate the average month are contractually due to each se bankruptcy. Then divide by 60.				it			
	Name of each creditor fo	r Vehicle 1	Average paymen	e monthly t				
	AmeriCredit/GM Finan	cial	_ \$	255.95				
	Total /	Average Monthly Payment	\$	255.95	Copy here =>	-\$ 255	Repeat this amount on line 33b.	
	Net Vehicle 1 ownership or leas Subtract line 13b from line 13a.		), enter \$0.		s	332.05	Copy net Vehicle 1 expense here => \$	332.05
Veh	nicle 2 Describe Vehicle 2:							
13d.	Ownership or leasing costs usin	g IRS Local Standard			\$	0.00		
	Average monthly payment for a leased vehicles.	II debts secured by Vehicle 2	2. Do not in	clude costs fo	r			
	Name of each creditor fo	r Vehicle 2	Average paymer	e monthly it				
			_ \$					
	Total /	Average Monthly Payment	\$		Copy here => -\$	0.0	Repeat this amount on line 33c.	
	Net Vehicle 2 ownership or leas Subtract line 13e from line 13d.	PORTS (PSECON   1902   1, 1923   1,	0, enter \$0.		. \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expens Transportation expense alloware	e: If you claimed 0 vehicles i nce regardless of whether yo	n line 11, ι ou use publ	ısing the IRS l ic transportati	Local Stand	dards, fill in the	Public \$_	0.00
	Additional public transportational also deduct a public transportation to claim more than the IRS Lo	ion expense, you may fill in t	what you b	vehicles in line elieve is the a	e 11 and if ppropriate	you claim that ye expense, but ye	you may ou may \$ _	0.00

Sharon Jean Logan

Debtor 1

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Debtor 1 Sharon Jean Logan

Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		500.74
	Do not include real estate, sales, or use taxes.	\$	508.74
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or		
	■ for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	4,879.79

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Debtor 1 Sharon Jean Logan Case number (if known)

Add	litional	Expense Deductions These are additional						
		Note: Do not includ	e any exper	nse allowances	s listed in lines 6-24.			
25.	insura	n insurance, disability insurance, and health nce, disability insurance, and health savings a lependents.	n savings a ccounts that	ccount expen t are reasonab	ises. The monthly expenses for health ly necessary for yourself, your spouse, or	r		
	Health	ninsurance	\$	85.00				
	Disabi	ility insurance	\$	0.00				
	Health	n savings account	+ \$	0.00	-			
	Total		\$	85.00	Copy total here=>	\$	85.00	
	Do yo	u actually spend this total amount?			_			
		No. How much do you actually spend?						
		Yes	\$					
26.	contin your h	nued contributions to the care of household ue to pay for the reasonable and necessary ca lousehold or member of your immediate family e contributions to an account of a qualified ABI	re and supp who is unal	oort of an elder ble to pay for s	ly, chronically ill, or disabled member of uch expenses. These expenses may	\$	200.00	
27.	Prote safety	ction against family violence. The reasonable of you and your family under the Family Viole	y necessary nce Prevent	/ monthly expe tion and Servic	nses that you incur to maintain the es Act or other federal laws that apply.			
	By law	v, the court must keep the nature of these expe	enses confid	lential.		\$	0.00	
28.	28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.  If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.  You must give your case trustee documentation of your actual expenses, and you must show that the additional							
		nt claimed is reasonable and necessary.	our actual c	xperioes, and	you must show that the additional	\$	0.00	
29.	\$189.5 public You m	ation expenses for dependent children who 58* per child) that you pay for your dependent elementary or secondary school. hust give your case trustee documentation of yed is reasonable and necessary and not alread	children who	o are younger	than 18 years old to attend a private or you must explain why the amount			
	* Subj	ect to adjustment on 4/01/25, and every 3 year	rs after that	for cases begu	un on or after the date of adjustment.	\$	0.00	
30.	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.  To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.  You must show that the additional amount claimed is reasonable and necessary.							
31.	Conti	nuing charitable contributions. The amount ments to a religious or charitable organization.	that you wil	I continue to co	ontribute in the form of cash or financial	+\$	0.00	
32.		all of the additional expense deductions. nes 25 through 31.	99	- agroundstandigh gallaf		\$	312.00	

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Debtor 1	Sharon Jean Logan	Case number (if known)	

	ctions for Debt Payment					
lo	ans, and other secured debt, fill in lir	st in property that you own, including home in ses 33a through 33e.  It is add all amounts that are contractually due				
cr	editor in the 60 months after you file for	bankruptcy. Then divide by 60.	. 10 00	ion scource		
	Mortgages on your home:					erage monthly yment
33a.	Copy line 9b here				=> \$_	0.00
	Loans on your first two vehicles:					
3b.	Copy line 13b here		**********		=> \$_	255.95
Зс.					=> \$	0.00
3d.	List other secured debts:			and the second s	r stores	
lame	of each creditor for other secured debt	Identify property that secures the debt		Does paymen include taxes insurance?		
			147 O G G	□ No	ecalitates.	
	-NONE-			☐ Yes	\$	
				_ 100	Ŭ _	
				□ No		
				☐ Yes	\$	
				□ No		
				☐ Yes	+\$	
					_ ۳.	
					Сору	
3e.	Total average monthly payment. Add li	nes 33a through 33d	\$	255.95	total here=>	\$ 255.95
4. A	re any debts that you listed in line 33 r other property necessary for your s	secured by your primary residence, a vehicle upport or the support of your dependents?	,			
	No. Go to line 35.					
	Yes. State any amount that you mus	t pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i> ). Information below.				
Nam	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NC	NE-		\$		÷ 60 = \$	
					_	
					Сору	
		Total	\$	0.00	total here=>	\$ 0.0
		s a priority tax, child support, or alimony - the	it			
200	re past due as of the filing date of you	ur bankruptcy case / 11 U.S.C. § 50/.				
	No. Go to line 36.  Yes Fill in the total amount of all of	these priority claims. Do not include current or				
	<ul> <li>res. rill in the total amount of all of</li> </ul>	these priority claims. Do not include current or				
	ongoing priority claims, such as	s those you listed in line 19.				

tor 1	Sha	Main Docume ron Jean Logan	ent Paç	je 61		8 umber ( <i>if known</i> )			
Fo	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Ba</i> ons for this form. <i>Bankruptcy Basics</i> may also be availa	asics specified	in the	separate clerk's	e office.			
	No.	Go to line 37.							
	Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing und	ler Chapter 13		\$		<del></del>		
		Current multiplier for your district as stated on the list Administrative Office of the United States Courts (for and North Carolina) or by the Executive Office for Un (for all other districts).	districts in Ala		х				
		To find a list of district multipliers that includes your d the link specified in the separate instructions for this f be available at the bankruptcy clerk's office.					Cor	y total	
		Average monthly administrative expense if you were	filing under Ch	apter 1	3	\$	-300	=> \$	
		of the deductions for debt payment. es 33e through 36.						\$	527.09
otal	Deduc	tions from Income							
38. Ac	dd all d	of the allowed deductions.							
		ne 24, All of the expenses allowed under IRS e allowances	\$	4,87	79.79				
C	Copy lir	ne 32, All of the additional expense deductions	\$	3	2.00				
C	Copy lir	ne 37, All of the deductions for debt payment	+\$	52	27.09	_			
		Total deductions	\$	5,7	88.81	Copy total I	nere:	<b>⇒</b> \$	5,718.8
rt 3:	De	termine Whether There is a Presumption of Abuse							
		te monthly disposable income for 60 months							
3	39a. Co	opy line 4, adjusted current monthly income	\$	5,94	14.07				
3	39b. Co	ppy line 38, Total deductions	-\$	5,7	18.88				
3		onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	2:	25.19	Copy here=>\$	s <del></del>	225.19	
F	or the	next 60 months (5 years)					x 60		
.3	39d. Ta	otal. Multiply line 39c by 60	39d.	\$	1:	3,511.40	Copy here=>	\$	13,511.40
			***************************************					1000	

- ☐ The line 39d is less than \$9,075\*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.
- ☐ The line 39d is more than \$15,150\*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.
- The line 39d is at least \$9,075\*, but not more than \$15,150\*. Go to line 41.
- \*Subject to adjustment on 4/01/25, and every 3 years after that for cases filed on or after the date of adjustment.

btor 1	Shai	ron Jean Logan Main Document Page	IE 62 of 68 Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If yo A Summary of Your Assets and Liabilities and Certain Statistical Info Schedules (Official Form 106Sum), you may refer to line 3b on that to	formation 200 073 57
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)  Multiply line 41a by 0.25	
2	5% of y	ne whether the income you have left over after subtracting all allo your unsecured, nonpriority debt. he box that applies:	lowed deductions is enough to pay
		39d is less than line 41b. On the top of page 1 of this form, check be part 5.	oox 1, There is no presumption of abuse.
	Line presu	39d is equal to or more than line 41b. On the top of page 1 of this fumption of abuse. You may fill out Part 4 if you claim special circumsta	form, check box 2. <i>There is a</i> tances. Then go to Part 5.
Part 4:	Giv	ve Details About Special Circumstances	
3. Do y reas	ou hav	ve any special circumstances that justify additional expenses or a ealternative? 11 U.S.C. § 707(b)(2)(B).	adjustments of current monthly income for which there
	No. Go	o to Part 5.	
	Yes. Fil ite	ll in the following information. All figures should reflect your average m em. You may include expenses you listed in line 25.	monthly expense or income adjustment for each
	ne	ou must give a detailed explanation of the special circumstances that recessary and reasonable. You must also give your case trustee documifustments.	make the expenses or income adjustments mentation of your actual expenses or income
	G	Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
			s
	<u></u>		\$
			\$
			\$
Part 5:	Sig	gn Below	
	By si	igning here, I declare under penalty of perjury that the information on	this statement and in any attachments is true and correct.
		haron Jean Logan	
D	ate A	ignature of Debtor 1 ugust 27, 2022	
	NA.	M/DD/YYYY	

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Debtor 1 Sharon Jean Logan

Case number (if known)

#### Current Monthly Income Details for the Debtor

#### **Debtor Income Details:**

Income for the Period 02/01/2022 to 07/31/2022.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Terry-Mudge LLP

Income	hw	MAG	nth:
moonic	UY	TATO	uu.

6 Months Ago:	02/2022	\$5,833.34
5 Months Ago:	03/2022	\$5,833.34
4 Months Ago:	04/2022	\$5,833.34
3 Months Ago:	05/2022	\$5,833.34
2 Months Ago:	06/2022	\$6,371.74
Last Month:	07/2022	\$5,959.31
	Average per month:	\$5,944.07

Case 8:22-bk-11457-SC Doc 1 Filed 08/	27/22 Entered 08/27/22 20:00:35 Desc		
Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Joseph Collier 3154 Weldon Avenue Los Angeles, CA 90065 (323) 286-3769 Fax: (323) 402-6961 California State Bar Number: 212828 CA jcollier513@gmail.com	FOR CONTROL ON THE CO		
☐ Debtor(s) appearing without an attorney			
Attorney for Debtor			
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA			
In re: Sharon Jean Logan	CASE NO.: CHAPTER: 7		
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS  [LBR 1007-1(a)]		
	[25](100)		
Debtor(s).			
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attormaster mailing list of creditors filed in this bankruptcy case, consistent with the Debtor's schedules and I/we assume all	consisting of 4 sheet(s) is complete, correct, and		
Date: August 27, 2022	Signature of Debtor		
Date:	Signature of Debtor 2 (joint debtor) ) (if applicable)		
Date: August 27, 2022			
	Signature of Attorney for Debtor (if applicable)		

Sharon Jean Logan P.O. Box 3771 Seal Beach, CA 90740

Joseph Collier Law Office of Joseph Collier 3154 Weldon Avenue Los Angeles, CA 90065

Amco Insurance Company c/o Jay Smith, Esq. 6644 Valjean Ave., #200 Van Nuys, CA 91406

Amco Insurance Company One Nationwide Blvd. Columbus, OH 43215

Amco Insurance Company c/o Melissa DeKoven, Agent for SOP 2710 Gateway Oaks Drive, Suite 150N Sacramento, CA 95833

AmeriCredit/GM Financial Po Box 181145 Arlington, TX 76096

Brady Adam Price c/o Estate of Brady Adam Price 26921 La Alameda, #3205 Mission Viejo, CA 92691

Caine & Weiner Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411 Capital One Attn: Bnakruptcy P.O. Box 30285 Salt Lake City, UT 84130

Central Portfolio Control Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200 Minnetonka, MN 55343

Citibank Attn: Bankruptcy P.O. Box 790034 St Louis, MO 63179

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

County of Orange P.O. Box 10260 Santa Ana, CA 92711

David C. Fee c/o Orange Capital Solutions 40477 Murrieta Hot Spr Rd D1-389 Murrieta, CA 92563

Employment Development Dept. Attn: Wage Garnishment P.O. Box 989056 West Sacramento, CA 95798-9056

First Credit Finance 16005 Sherman Way Van Nuys, CA 91406 First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Hanover Commercial Services, Inc. 1410 Third Street, Ste. 1 Riverside, CA 92507

Internal Revenue Service Centralized Insolvency Operation P. O. Box 7346 Philadelphia, PA 19101-7346

IRS Centralized Insolvency Operation P.O. Box 21126 Philadelphia, PA 19114

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201

Midland Funding, LLC Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Nordstrom FSB Attn: Bankruptcy Po Box 6555 Englewood, CO 80155

Orange County Treasurer-Tax Collect County Service Center 601 North Ross Street Santa Ana, CA 92701 Orange County Treasurer-Tax Collect Tax Collector's Office 12 Civic Center Plaza Santa Ana, CA 92701

Quality Acceptance 14546 Hamlin Street 3rd Floor Van Nuys, CA 91411

Radius Global Solutions P.O. Box 390905 Minneapolis, MN 55439

Smile Brands Inc. Attn: Bankruptcy 100 Spectrum Center Dr, Ste 1500 Irvine, CA 92618

State of CA Franchise Tax Board Personal Bankruptcy MS A340 P.O. Box 2952 Sacramento, CA 95812

State of California - EDD Benefit Overpayment Collection Section, MIC 91 P.O. Box 826218 Sacramento, CA 94230-6218