Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF ALABAMA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

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	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu	e the name that is on government-issued ure identification (for mple, your driver's	Charles First name	Patrice First name
		nse or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	McAllister Last name and Suffix (Sr., Jr., II, III)	McAllister Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ude your married or den names.	Charles Hadley McAllister McAllister Charles Charles H Patrice	Patrice R McAllister Patrice Crixell McAllister Patrice R Crixell
3.	youi num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-1020	xxx-xx-0367

		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.	■ 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	1550 Opelika Road, Suite 6 #143	If Debtor 2 lives at a different address:			
		Auburn, AL 36830 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Lee 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.	County 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.			
		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 bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 Charles M		•				Case number (if known)			
D	Tall the Oak	and Albanid N	(D							
Par 7.	The chapter of the	he	Check on	e. (For a brie	f description of e		by 11 U.S.C. § 342(b) for Individuals Filing for Bank	ruptcy		
	Bankruptcy Code you are choosing to file under		(Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	J	Chapt	er 7							
			☐ Chapt	er 11						
			☐ Chapt	er 12						
			☐ Chapt	er 13						
8.	How you will pa	y the fee	abo ord	out how you r	nay pay. Typicall orney is submittir	y, if you are paying the fee	neck with the clerk's office in your local court for more yourself, you may pay with cash, cashier's check, cehalf, your attorney may pay with a credit card or ch	or money		
						nents. If you choose this official Form 103A).	ption, sign and attach the Application for Individuals	to Pay		
			☐ I re	quest that no is not require to your fa	ny fee be waived ed to, waive your amily size and yo	I (You may request this op fee, and may do so only if ou are unable to pay the fe	tion only if you are filing for Chapter 7. By law, a jud your income is less than 150% of the official povert e in installments). If you choose this option, you mus official Form 103B) and file it with your petition.	ty line that		
9.	Have you filed for		■ No.							
	bankruptcy with last 8 years?	bankruptcy within the last 8 years?	☐ Yes.							
				District _		When	Case number			
				District _		When	Case number			
				District _		When	Case number			
10.	Are any bankrup	•	■ No							
	cases pending of filed by a spousonot filing this ca you, or by a bus partner, or by ar affiliate?	e who is se with iness	☐ Yes.							
				Debtor _			Relationship to you			
				District _		When	Case number, if known			
				Debtor _			Relationship to you			
				District _		When	Case number, if known			
11.	Do you rent you residence?	r	■ No.	Go to line	12.					

☐ Yes.

No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Has your landlord obtained an eviction judgment against you?

	otor 1 Charles McAlliste otor 2 Patrice McAllister				Case number (if known)
Par	t3: Report About Any Bu	ısinesses	You Owi	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	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.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	per, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (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. § 1182(1)?	proceed you are o	under Suchoosing v statement)(B).	bchapter V so that it to proceed under Su ent, and federal incon	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	No.	I am	not filing under Chap	iter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	· Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			diate attention is , 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 i	s the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

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

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

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

About Debtor 1:

You must check one:

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

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

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

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

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

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

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

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

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

☐ Incapacity.

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

Disability.

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

☐ Active duty.

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

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

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

You must check one.

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

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

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

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

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

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

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

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

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

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

☐ Incapacity.

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

□ Disability.

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

☐ Active duty.

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

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

	tor 1 Charles McAlliste tor 2 Patrice McAllister				Case numbe	「 (if known)		
Pari	6: Answer These Quest	ions for R	eporting Purposes					
	What kind of debts do you have?	16a.		ly consumer debts? Con personal, family, or house		ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.	,				
			Yes. Go to line 17.					
		16b.		ly business debts? Busir	ness debts are debts t	that you incurred to obtain		
			money for a business or	investment or through the	operation of the busi	ness or investment.		
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts y	ou owe that are not consu	mer debts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	opter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.		r 7. Do you estimate that a e available to distribute to		erty is excluded and administrative expenses		
	are paid that funds will be available for distribution to unsecured creditors?							
			Yes					
18.	How many Creditors do	■ 1-49		1 ,000-5,000)	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99)	5001-10,00	0	5 0,001-100,000		
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than100,000		
19.	How much do you estimate your assets to	\$0 - \$	550,000	□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	be worth?	□ \$50,001 - \$100,000		□ \$10,000,00°	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			01 - \$500 million	☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$	•	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		001 - \$100,000 ,001 - \$500,000		1 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	camined this petition, and	declare under penalty of	perjury that the inform	nation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
				did not pay or agree to pay ad the notice required by 1		t an attorney to help me fill out this		
		I request	relief in accordance with	the chapter of title 11, Unit	ed States Code, spec	cified in this petition.		
			cy case can result in fines		oncealing property, or obtaining money or property by fraud in connection with a \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1			
		/s/ Cha	rles McAllister		/s/ Patrice McAll			
			s McAllister e of Debtor 1		Patrice McAlliston Signature of Debtor			
		Executed				ne 17, 2020		
			MM / DD / YYYY		MM	/ DD / YYYY		

Debtor 1	Charles McAllister	
Debtor 2	Patrice McAllister	Case number (if known)
		-

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.

/s/ Marrell J. McNeal	Date	June 17, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Marrell J. McNeal ASB-2160-L58M		
Printed name		
Marrell J. McNeal, Attorney At Law, PC		
Firm name		
P.O. Box 308		
Opelika, AL 36803-0308		
Number, Street, City, State & ZIP Code		
Contact phone 334-745-7033	Email address	marrell@marrellmcneallaw.com
ASB-2160-L58M AL		
Bar number & State		

Fill	in this informa	ation to identify your case:			
Del	btor 1	Charles McAllister			
Del	btor 2	First Name Middle Name Last Name Patrice McAllister			
(Spc	ouse if, filing)	First Name Middle Name Last Name			
Uni	ited States Banl	kruptcy Court for the: MIDDLE DISTRICT OF ALABAMA			
1	se number		_	Check if mende	this is an d filing
		m 106Sum Your Assets and Liabilities and Certain Statistical Information		12	./15
Be a	as complete an rmation. Fill ou r original form	and accurate as possible. If two married people are filing together, both are equally responsible at all of your schedules first; then complete the information on this form. If you are filing amen s, you must fill out a new <i>Summary</i> and check the box at the top of this page.		plying	correct
				our ass	ets what you own
1.		B: Property (Official Form 106A/B) 55, Total real estate, from Schedule A/B	\$		0.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$		10,639.33
	1c. Copy line	63, Total of all property on Schedule A/B	\$		10,639.33
Par	rt 2: Summa	rize Your Liabilities			
				our liab nount y	vou owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$		6,732.00
3.	Schedule E/F 3a. Copy the	F: Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$		16,244,632.52
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$		199,432.65
		Your total liabilities	\$	10	6,450,797.17
Par	rt 3: Summa	rize Your Income and Expenses			
4.		Your Income (Official Form 106I) mbined monthly income from line 12 of Schedule I	\$		3,562.97
5.		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	\$		3,445.00
Par	rt 4: Answer	These Questions for Administrative and Statistical Records			
6.		g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with y	our othe	er sche	dules.
7.	■ Yes What kind of	debt do you have?			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Debtor 1	Charles McAllister
Debtor 2	Patrice McAllister

Case number (if known)

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.

4,765.66

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

	Tota	al 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.)	\$_	16,244,632.52
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	30,336.00
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.	\$	16,274,968.52

Document

	rmation to identify your case	and this filing:			
Debtor 1	Charles McAllister First Name	Middle Name Last Nan	ne .		
Debtor 2 (Spouse, if filing)	Patrice McAllister First Name	Middle Name Last Nan			
United States E	Bankruptcy Court for the: MIDI	DLE DISTRICT OF ALABAMA			
Case number					☐ Check if this is an
Oase number					amended filing
Official F	orm 106A/B				
Schedu	le A/B: Propert	V			12/15
think it fits best. information. If m Answer every qu	Be as complete and accurate as pore space is needed, attach a separestion.	s. List an asset only once. If an asset foossible. If two married people are filin arate sheet to this form. On the top of a	g together, both are equa ny additional pages, writ	illy responsible for sup	plying correct
l. Do you own o	r have any legal or equitable inter	est in any residence, building, land, or	similar property?		
■ No. Go to F	art 2.				
☐ Yes. Where	e is the property?				
		e interest in any vehicles, whether or report it on Schedule G: Executory			nicles you own that
3. Cars, vans,	trucks, tractors, sport utility v	ehicles, motorcycles			
□ No					
■ Yes					
			Dr	o not deduct secured cla	ime or exemptions. But
3.1 Make:	Honda Accord	Who has an interest in the propert	yr Check one the	e amount of any secured	claims on Schedule D:
Model: Year:	2015	☐ Debtor 1 only ☐ Debtor 2 only		reditors Who Have Clain	
	nate mileage: 105,000	Debtor 1 and Debtor 2 only		urrent value of the tire property?	Current value of the portion you own?
Other info		\square At least one of the debtors and an	nother		
	amage \$3500.00			¢E 042 00	
	er Drives & Pays	Check if this is community pro (see instructions)	perty	\$5,913.00	\$5,913.00

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Debtor 2	Charles McA Patrice McAl			Case number (if known)	
Exam _i □ No	ehold goods and fuples: Major appliances. Describe	urnishings ces, furniture, linens, china, l	kitchenware		
		Bedroom 1			\$500.00
		Bedroom 2			\$20.00
		Bedroom 3			\$500.00
		Living Room			\$600.00
		Kitchen			\$100.00
		Garage			\$500.00
		Attic			\$500.00
■ No □ Yes 8. Collect Exam No	ples: Televisions ar including cell s. Describe tibles of value ples: Antiques and	phones, cameras, media pla	r other artwork; books, pictures, or other		
Exam _i ■ No	ment for sports an ples: Sports, photog musical instru	graphic, exercise, and other	hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes and kay	aks; carpentry tools;
■ No		, shotguns, ammunition, and	I related equipment		
□ No		thes, furs, leather coats, des	signer wear, shoes, accessories		
		Clothing			\$300.00
■ No		velry, costume jewelry, enga	gement rings, wedding rings, heirloom jo	ewelry, watches, gems, gold, silv	/er

	ebtor 1 Charles Webtor 2 Patrice Me		Case number (if known,)
	- Tatilee III	or unoto:		·
	Non-farm animals Examples: Dogs, ca ■ No	ats, birds, horses		
	Yes. Describe			
	Any other personal ■ No	and household items you did	not already list, including any health aids you did not list	
	☐ Yes. Give specific	information		
15.			art 3, including any entries for pages you have attached	\$3,020.00
Pai	rt 4: Describe Your Fir	nancial Assets		
Do	you own or have an	ny legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	ou have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your peti	tion
	institution		ounts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking	Checking	\$1,706.33
		ds, or publicly traded stocks nds, investment accounts with bro Institution or issuer i	okerage firms, money market accounts	
	Non-publicly traded	stock and interests in incorpo		
	•		orated and unincorporated businesses, including an intere	st in an LLC, partnership, and
	■ No	information about them Name of entity:	, , ,	st in an LLC, partnership, and
20.	■ No □ Yes. Give specific Government and co Negotiable instrume Non-negotiable instr	information about them Name of entity: prporate bonds and other negoents include personal checks, cas		st in an LLC, partnership, and
20.	■ No □ Yes. Give specific Government and co Negotiable instrume Non-negotiable instr	information about them Name of entity: prporate bonds and other negoents include personal checks, cas	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders.	st in an LLC, partnership, and
20.	■ No □ Yes. Give specific Government and co Negotiable instrume Non-negotiable instr ■ No □ Yes. Give specific Retirement or pensi	c information about them	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders.	
20.	■ No □ Yes. Give specific Government and co Negotiable instrume Non-negotiable instr ■ No □ Yes. Give specific Retirement or pens Examples: Interests	c information about them	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
20. 21. 22.	■ No □ Yes. Give specific Government and co Negotiable instrume Non-negotiable instr ■ No □ Yes. Give specific Retirement or pens Examples: Interests ■ No □ Yes. List each acco Security deposits a Your share of all unit	c information about them	% of ownership: **ptiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. **Position of the image is a second	g plans

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2			Case number (if known)	
23. Ann ı ■ No		ct for a periodic payment of money to you, either for life	or for a number of years)	
	S	Issuer name and description.		
26 U. ■ No	S.C. §§ 530(b)(tation IRA, in an account in a qualified ABLE progra 1), 529A(b), and 529(b)(1). Institution name and description. Separately file the re		m.
	······	, , ,	, , , , , , , , , , , , , , , , , , , ,	
■ No	•	r future interests in property (other than anything lis	sted in line 1), and rights or powers exercis	able for your benefit
		c information about them		
	mples: Internet	s, trademarks, trade secrets, and other intellectual p domain names, websites, proceeds from royalties and I		
☐ Ye	s. Give specific	c information about them		
Exa	mples: Building	es, and other general intangibles permits, exclusive licenses, cooperative association ho	ldings, liquor licenses, professional licenses	
■ No □ Ye		c information about them		
Money o	or property ow	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		to you information about them, including whether you already	filed the returns and the tax years	
Exa. ■ No	,	e or lump sum alimony, spousal support, child support, r	maintenance, divorce settlement, property sett	element
Exa. ■ No	mples: Unpaid v benefits	neone owes you wages, disability insurance payments, disability benefits ; unpaid loans you made to someone else c information	s, sick pay, vacation pay, workers' compensat	ion, Social Security
		nce policies disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insurance	
■ Ye	s. Name the ins	surance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Term Life - \$999,999.00	Patrice McAllister	\$0.00
If yo som	u are the benef eone has died.	perty that is due you from someone who has died iciary of a living trust, expect proceeds from a life insurate information	ance policy, or are currently entitled to receive	property because

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Debtor 2	Charles McAllister Patrice McAllister Case number (if known)
Exam □ No -	s against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	
	Direct TV Class Action Suit	Unknown
	Mercedes Benz Class Action Suit	Unknown
■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Describe each claim	to set off claims
■ No	nancial assets you did not already list Give specific information	
	the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$1,706.33
	escribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
-	own or have any legal or equitable interest in any business-related property? o to Part 6.	
☐ Yes.	Go to line 38.	
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. you own or have an interest in farmland, list it in Part 1.	
′	u own or have any legal or equitable interest in any farm- or commercial fishing-related property? Go to Part 7.	
☐ Yes	s. Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
Exam ■ No	u have other property of any kind you did not already list? ples: Season tickets, country club membership Give specific information	
	the dollar value of all of your entries from Part 7. Write that number here	¢0.00
54. AUG	the donar value of all of your entries from Fart 7. Write that humber here	\$0.00

Charles McAllister Debtor 1 Debtor 2 **Patrice McAllister**

Case number (if known)

Part	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	\$5,913.00		
57.	Part 3: Total personal and household items, line 15	\$3,020.00		
58.	Part 4: Total financial assets, line 36	\$1,706.33		
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	\$10,639.33	Copy personal property total	\$10,639.33
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$10,639.33

Fill in this infor	mation to identify your	case:		
Debtor 1	Charles McAlliste			
	First Name	Middle Name	Last Name	
Debtor 2	Patrice McAlliste	r		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	ALABAMA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

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.

Part 1: Identify the Property You Claim as Exempt

1	Which set of exemptions a	re vou claiming? Check one	e only even if your	snouse is filina with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.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 exempt, 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	Amo	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.	
Bedroom 1 Line from Schedule A/B: 6.1	\$500.00		\$500.00	Ala. Code §§ 6-10-6, 6-10-12
			100% of fair market value, up to any applicable statutory limit	
Bedroom 2 Line from Schedule A/B: 6.2	\$20.00		\$20.00	Ala. Code §§ 6-10-6, 6-10-12
Line Horr Schedule AV.B. 4.2			100% of fair market value, up to any applicable statutory limit	
Bedroom 3 Line from Schedule A/B: 6.3	\$500.00		\$500.00	Ala. Code §§ 6-10-6, 6-10-12
Line nom <i>Schedule Alb.</i> 0.3			100% of fair market value, up to any applicable statutory limit	
Living Room Line from Schedule A/B: 6.4	\$600.00		\$600.00	Ala. Code §§ 6-10-6, 6-10-12
Ellie IIoili ochedule A.B. G.4			100% of fair market value, up to any applicable statutory limit	
Kitchen Line from Schedule A/B: 6.5	\$100.00		\$100.00	Ala. Code §§ 6-10-6, 6-10-12
LINE HOLL SCHEUUR AVD. U.J			100% of fair market value, up to any applicable statutory limit	

Charles McAllister Debtor 1 Debtor 2 Patrice McAllister

Case number (if known)

Brief description of the property and line on Schedule 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 Schedule A/B	Che	ck only one box for each exemption.	
Garage Line from Schedule A/B: 6.6	\$500.00		\$500.00	Ala. Code §§ 6-10-6, 6-10-12
Line IIOIII <i>Schedule AVB</i> . 0.0			100% of fair market value, up to any applicable statutory limit	
Attic	\$500.00		\$500.00	Ala. Code §§ 6-10-6, 6-10-12
Line nom <i>Schedule AVB</i> . 0.7			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	Ala. Code §§ 6-10-6, 6-10-12
Line nom <i>Schedule AVB</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Checking	\$1,706.33		\$1,706.33	Ala. Code §§ 6-10-6, 6-10-12
Line Hom Schedule AVD. 17.1			100% of fair market value, up to any applicable statutory limit	

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Best Case Bankruptcy

Fill in this information	on to identify you	r case:				
Debtor 1 C	harles McAllis	ter				
Fi	irst Name	Middle Name L	ast Name			
	Patrice McAllist irst Name					
(Spouse if, filing) Fi	irst name	Middle Name L	ast Name			
United States Bankrup	ptcy Court for the:	MIDDLE DISTRICT OF ALABAMA	L			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form 1	06D					
Official Form 10	•					
Schedule D:	Creditors	Who Have Claims Se	ecured	by Property	'	12/15
	litional Page, fill it o	f two married people are filing together, out, number the entries, and attach it to t				
	•	nis form to the court with your other sol	nedules You	ı have nothing else to	report on this form	
Yes. Fill in all o			ioddios. Tot	a nave norming cloc to	report on this form.	
		Delow.				
	cured Claims			Column A	Column B	Column C
for each claim. If more th	han one creditor has	nore than one secured claim, list the credito a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
Pentagon Fed Union	deral Credit	Describe the property that secures the	claim:	\$6,732.00	\$5,913.00	\$819.00
Creditor's Name		2015 Honda Accord 105,000 m	iles			
Attn: Bankrup	otcy Dept.	Body Damage \$3500.00				
P.O. Box 1432	_ '	Daughter Drives & Pays As of the date you file, the claim is: Che	ck all that			
Alexandria, V	Α	apply.	ok all triat			
22313-2032	0	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 mor	taane or secu	red		
■ Debtor 2 only		car loan)	igage or secu	ica		
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the de		☐ Judgment lien from a lawsuit	,			
Check if this claim r community debt		Other (including a right to offset)				
Date debt was incurred	05/06/2019	Last 4 digits of account number	4811			
	-	olumn A on this page. Write that number	here:	\$6,732	2.00	
If this is the last page Write that number he		the dollar value totals from all pages.		\$6,732	2.00	

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.

Official Form 106D

Fill in this info	rmation to identify your ca	ase:					
Debtor 1	Charles McAllister						
	First Name	Middle Name		Last Name			
Debtor 2	Patrice McAllister First Name	Ministra Managa		LastNama			
(Spouse if, filing)	First Name	Middle Name		Last Name			
United States B	Bankruptcy Court for the:	MIDDLE DISTRI	ICT OF ALABAI	MA			
Case number (if known)						_	if this is an led filing
Be as complete a any executory co Schedule G: Exec Schedule D: Cred left. Attach the Co	E/F: Creditors Who accurate as possible. Use ntracts or unexpired leases the cutory Contracts and Unexpired litors Who Have Claims Secure ontinuation Page to this page.	Part 1 for creditor hat could result in ed Leases (Officia red by Property. If	s with PRIORITY a claim. Also lis I Form 106G). Do more space is n	claims and Part 2 of executory contra o not include any c eeded, copy the Pa	cts on Schedule A/B: reditors with partially art you need, fill it out	Property (Official For secured claims that a number the entries i	m 106A/B) and on are listed in n the boxes on the
name and case no	umber (if known).						
Part 1: List	All of Your PRIORITY Uns	ecured Claims					
	All of Your PRIORITY Unsitors have priority unsecured		u?				
	itors have priority unsecured		u?				
1. Do any credi	itors have priority unsecured		u?				
 Do any credi No. Go to Yes. List all of yo identify what possible, list t 	itors have priority unsecured	claims against yo If a creditor has mo both priority and no according to the creditor in the credit of the credit	ore than one priori onpriority amounts editor's name. If y	s, list that claim here ou have more than	and show both priority	and nonpriority amoun	ts. As much as
 Do any credi No. Go to Yes. List all of yo identify what possible, list if Part 1. If more 	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order	If a creditor has mo both priority and no according to the cricular claim, list the	ore than one priori onpriority amounts editor's name. If y other creditors in	s, list that claim here ou have more than Part 3.	and show both priority	and nonpriority amoun claims, fill out the Conti	ts. As much as nuation Page of Nonpriority
 Do any credi No. Go to Yes. List all of yo identify what possible, list t Part 1. If more (For an expla 	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a parti The priority unsecured claim, secured.	If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for	ore than one priori onpriority amounts editor's name. If y other creditors in	s, list that claim here ou have more than Part 3. nstruction booklet.)	and show both priority two priority unsecured of Total claim	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credi No. Go to Yes. List all of yo identify what possible, list the Part 1. If more (For an explain the possible) Alabar 	itors have priority unsecured Part 2. ur priority unsecured claims. type of claim it is. If a claim has the claims in alphabetical order e than one creditor holds a parti	If a creditor has me both priority and ne according to the cricular claim, list the e the instructions for the control of the	ore than one priori onpriority amounts editor's name. If y other creditors in or this form in the i	is, list that claim here ou have more than Part 3. Instruction booklet.)	and show both priority two priority unsecured o	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority
 Do any credi No. Go to Yes. List all of yo identify what yossible, list the Part 1. If more (For an explain Priority Company) 	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secure Type of claim, secured type of claim type of claim type of claim type of claim, secured type of claim type o	If a creditor has me both priority and ne according to the cricular claim, list the e the instructions for the control of the	ore than one priori onpriority amounts editor's name. If y other creditors in or this form in the i	is, list that claim here ou have more than Part 3. Instruction booklet.)	and show both priority two priority unsecured of Total claim	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credic No. Go to No. Go to Yes. List all of you identify what it possible, list it Part 1. If more (For an explain Priority Company) Alabar Priority Company 	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured Type of claim it is. If a claim has Type of cl	If a creditor has me both priority and ne according to the cricular claim, list the e the instructions for the control of the	ore than one priori onpriority amounts editor's name. If y other creditors in or this form in the i	is, list that claim here ou have more than Part 3. Instruction booklet.)	and show both priority two priority unsecured of Total claim	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credi No. Go to Yes. List all of yo identify what yossible, list the Part 1. If more (For an explain Priority Company) Alabar Priority Company 50 N R Montg 	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secure Type of claim, secured type of claim type of claim type of claim type of claim, secured type of claim type o	If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for the control of the	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of accounts was the debt inc	is, list that claim here ou have more than Part 3. Instruction booklet.)	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credic No. Go to No. Go to Yes. List all of you identify what it possible, list it Part 1. If more (For an explain Priority Control of the No. 1 of the No	itors have priority unsecured Part 2. For priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured to the compartment of Reverse to the compartment of	If a creditor has me both priority and no according to the cricular claim, list the e the instructions for the instructions for the control of the control o	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of accounts was the debt inc	s, list that claim here ou have more than Part 3. Instruction booklet.) t number urred?	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credic No. Go to No. Go to Yes. List all of you identify what it possible, list it Part 1. If more (For an explain Priority Control of the No. 1 of the No	itors have priority unsecured Part 2. Fur priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a partitionation of each type of claim, secured by the compartment of Reverence of the compartment of the compartment of Reverence of the compartment of the compartm	If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for the instructions for the condition of the condition	ore than one priorion priority amounts editor's name. If yo other creditors in or this form in the idigits of accountwas the debt inche date you file,	s, list that claim here ou have more than Part 3. Instruction booklet.) t number urred?	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credi No. Go to Yes. List all of yo identify what possible, list if Part 1. If more (For an explain Priority Control of the possible of the possibl	ur priority unsecured claims. type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, see than Department Of Reversed to the claim of the claim o	If a creditor has me both priority and ne according to the cricular claim, list the e the instructions for the ins	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of accountwas the debt inche date you file, ntingent iquidated	s, list that claim here ou have more than Part 3. Instruction booklet.) t number urred?	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credi No. Go to Yes. List all of yo identify what possible, list the Part 1. If more (For an explate) Alabai Priority Comments 50 N R Montg Number Who incurr Debtor 1 Debtor 2 	itors have priority unsecured Part 2. Fur priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a partitionation of each type of claim, secured than the claims in alphabetical order than one creditor holds a partitionation of each type of claim, secured than the claims in alphabetical order than Department Of Reversity in the claim is a claim in the cl	If a creditor has me both priority and no according to the cricular claim, list the e the instructions for the instruction in the instr	ore than one priori conpriority amounts editor's name. If y other creditors in or this form in the i digits of accoun was the debt inc he date you file, ntingent iquidated puted	is, list that claim here ou have more than Part 3. Instruction booklet.) It number urred? the claim is: Check	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credi No. Go to Yes. List all of yo identify what it possible, list the Part 1. If more (For an explain Priority Control of the Part 1. If more (For an explain Priority Control of the Part 1. If more (For an explain Priority Control of the Part 1. If more priority Co	ur priority unsecured claims. type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a parti anation of each type of claim, secured than Department Of Reve Creditor's Name Ripley Street Jomery, AL 36130 Street City State Zip Code and the debt? Check one. I only 2 only I and Debtor 2 only	If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for the control of the	ore than one priorion priority amounts editor's name. If yother creditors in or this form in the idigits of accountwas the debt incomplete the date you file, natingent iquidated pruted of PRIORITY unservice in the priority amounts in the date of the date of the priority amounts in the date of the date of the priority amounts in the date of	s, list that claim here ou have more than Part 3. Instruction booklet.) It number urred? the claim is: Checker ecured claim:	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
 Do any credic No. Go to Yes. List all of you identify what it possible, list it Part 1. If more (For an explain Priority Company) Alabar Priority Company 50 N R Montg Number Who incurred Debtor 1 Debtor 1 Debtor 1 At least of 	itors have priority unsecured Part 2. Fur priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured than one creditor holds. Further than the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured than the claims. Further than the claim is a claim has the claims in alphabetical order than the claims in alphabetical order than the claims in a claim in the claims. Further than the claims in a claim in the claims in the c	If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for the enue Last 4 When Cor	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of account was the debt incomplete the date you file, ntingent iquidated puted of PRIORITY unsermestic support obline properties of the prioriorial prio	s, list that claim here ou have more than Part 3. Instruction booklet.) t number urred? the claim is: Checker ecured claim: igations	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
1. Do any credi No. Go to Yes. 2. List all of yo identify what it possible, list it Part 1. If more (For an explain and its possible in the	itors have priority unsecured Part 2. Fur priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particulation of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of each type of claim, secured by the common of the debtors and another of this claim is for a community.	If a creditor has me both priority and no according to the cricular claim, list the e the instructions for the instruction in the i	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of account was the debt income the date you file, ntingent iquidated puted of PRIORITY unsermestic support obless and certain other priority in the sand certain of the priority in the priority in the sand certain of the priority in the priority	is, list that claim here ou have more than Part 3. Instruction booklet.) It number urred? the claim is: Checkle claim: igations her debts you owe the output of the part of	Total claim \$710.00 and show both priority two priority unsecured of the state of	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount
1. Do any credi No. Go to Yes. 2. List all of yo identify what it possible, list it Part 1. If more (For an explain and its possible in the	itors have priority unsecured Part 2. Fur priority unsecured claims. Type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured than one creditor holds. Further than the claims in alphabetical order than one creditor holds a particular anation of each type of claim, secured than the claims. Further than the claim is a claim has the claims in alphabetical order than the claims in alphabetical order than the claims in a claim in the claims. Further than the claims in a claim in the claims in the c	claims against yo If a creditor has mo both priority and no according to the cricular claim, list the e the instructions for the enue Last 4 When As of the Core Displayers Type of Dor ty debt Tax	ore than one priorion priority amounts editor's name. If y other creditors in or this form in the idigits of account was the debt income the date you file, ntingent iquidated puted of PRIORITY unsermestic support obless and certain other priority in the sand certain of the priority in the priority in the sand certain of the priority in the priority	is, list that claim here ou have more than Part 3. Instruction booklet.) It number urred? the claim is: Checkle claim: igations her debts you owe the output of the part of	and show both priority two priority unsecured of Total claim \$710.00	and nonpriority amoun laims, fill out the Conti Priority amount	ts. As much as nuation Page of Nonpriority amount

Debtor 1 Charles McAllister Debtor 2 Patrice McAllister Case number (if known) 2.2 \$910.97 \$910.97 \$0.00 Alabama Department Of Revenue Last 4 digits of account number Priority Creditor's Name When was the debt incurred? 50 N Ripley Street Montgomery, AL 36130 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 $\hfill\square$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify

☐ Yes 2016 Income Tax 2.3 Alabama Department Of Revenue Last 4 digits of account number \$2,296.35 \$2,296.35 \$0.00 Priority Creditor's Name When was the debt incurred? 50 N Ripley Street Montgomery, AL 36130 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 lacksquare Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2018 Income Tax Alabama Department Of Revenue 2.4 \$2,141.53 Last 4 digits of account number \$2,141.53 \$0.00 Priority Creditor's Name When was the debt incurred? 50 N Ripley Street Montgomery, AL 36130 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 Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify

2017 Income Tax

Official Form 106 E/F

☐ Yes

Best Case Bankruptcy

Debtor 1 Charles McAllister Case number (if known) Debtor 2 Patrice McAllister 2.5 \$627.07 \$0.00 \$627.07 **Internal Revenue Service** Last 4 digits of account number Priority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? P.O. Box 7346 Philadelphia, PA 19101-7346 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 $\hfill\square$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **2018 Taxes** 2.6 **Internal Revenue Service** Last 4 digits of account number \$2,381.12 \$0.00 \$2,381.12 Priority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? P.O. Box 7346 Philadelphia, PA 19101-7346 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 $\hfill\square$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2017 Taxes 2.7 **Internal Revenue Service** \$2,756.19 \$0.00 Last 4 digits of account number \$2,756.19 Priority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? P.O. Box 7346 Philadelphia, PA 19101-7346 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

Official Form 106 E/F

■ No

☐ Yes

Debtor 2 only

■ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Taxes and certain other debts you owe the government

2016 Taxes

☐ Claims for death or personal injury while you were intoxicated

☐ Domestic support obligations

☐ Disputed

☐ Other. Specify

Best Case Bankruptcy

Debtor 1 Charles McAllister Debtor 2 Patrice McAllister	Case	e number (if known)		
2.8 Internal Revenue Service	Last 4 digits of account number	\$20,134.06	\$0.00	\$20,134.06
Priority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 7346	When was the debt incurred?		 	
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Chec	k all that apply		
Who incurred the debt? Check one.	Contingent	in an anat appry		
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe t	the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while	=		
■ No	☐ Other. Specify	,		
☐ Yes	2014 Taxes			
2.9 Internal Revenue Service	Last 4 digits of account number	\$15,716.87	\$0.00	\$15,716.87
Priority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 7346	When was the debt incurred?			
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Chec	k all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe t	the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while	=		
■ No	☐ Other. Specify	•		
Yes	2013 Taxes			
2.1				
o Internal Revenue Service	Last 4 digits of account number	\$10,745.80	\$0.00	\$10,745.80
Priority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 7346	When was the debt incurred?			
Philadelphia, PA 19101-7346	As of the data was 60 of the state of the	L. Hallar		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Chec	к ан тпат арріу		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
	Disputed			
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			

■ No

☐ Yes

☐ Domestic support obligations

☐ Other. Specify

Best Case Bankruptcy

□ At least one of the debtors and another□ Check if this claim is for a community debt

Is the claim subject to offset?

■ Taxes and certain other debts you owe the government

□ Claims for death or personal injury while you were intoxicated

2012 Taxes

btor 1 Charles McAllister btor 2 Patrice McAllister	Case number ((if known)			
United States District Court	\$ Last 4 digits of account number	516,186,21 2.56	\$16,186,212 5		\$0.0
Priority Creditor's Name 501 West Fifth Street, Suite 1100 Austin, TX 78701	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that ap	pply			
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	nent			
Is the claim subject to offset?	☐ Claims for death or personal injury while you were in				
No	Other. Specify				
☐ Yes	Federal Restitution			_	
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla				
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of	s against you? this form to the court with your other schedules.	. Do not list clain	ns already include ms fill out the Con	ed in Part 1.	If more
Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☐ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is.	. Do not list clain	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority	. Do not list clain	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code	this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one.	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed	. Do not list clain y unsecured clai	ns already include ms fill out the Con	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.lf you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	. Do not list clain y unsecured clai	ns already include ms fill out the Cor	ed in Part 1. Itinuation P	If more age of
Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Advantage Chiropractic Clinic Nonpriority Creditor's Name 2408 East University Drive, Suite 101 Auburn, AL 36830-9404 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreemen	. Do not list clain y unsecured clai t apply	ns already include ms fill out the Cor	ed in Part 1. Itinuation P	If more age of

American Express	Last 4 digits of account number 7618	\$1,012.0
Nonpriority Creditor's Name	When was the debt incurred?	
Attn: Bankruptcy Dept. P.O. Box 981537	When was the dept incurred?	
El Paso, TX 79998		
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 unsecured claim:	
☐ 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 or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Auburn Pediatric And Adult		
Medicine Nonpriority Creditor's Name	Last 4 digits of account number 2890	\$20.0
Attn: Bankruptcy Dept.	When was the debt incurred?	
2353 Bent Creek Road, Suite 110		
Auburn, AL 36830-9421	_	
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 unsecured 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	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
Bank Of America	Last 4 digits of account number 5631	\$20,192.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 982235	When was the debt incurred?	
El Paso, TX 79998-2235 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 claim:	
_	Student loans	
☐ Check if this claim is for a community debt		
ls 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 or profit-sharing plans, and other similar debts	
— 110	The following of the first of t	

Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number 6158	\$20 <i>1</i> 52 nn
		\$29,452.00
Attn: Bankruptcy Dept.	When was the debt incurred?	
P.O. Box 982235		
El Paso, TX 79998-2235	As at the date way file the plains in Charles II that such	
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 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	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card - Collection	
Capital One Bank USA NA	Last 4 digits of account number 4046	\$5,931.74
Nonpriority Creditor's Name	+U4U	φυ,συ 1.74
Attn: Bankruptcy Dept.	When was the debt incurred?	
P.O. Box 85015		
Richmond, VA 23285-5075 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.	7.6 or and date you me, and oranni at onlook 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:	
☐ 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 or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Credit Card - Collection	
Capital One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number 1859	\$7,984.73
Attn: Bankruptcy Dept.	When was the debt incurred?	
P.O. Box 30281		
Salt Lake City, UT 84130 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.	The state year may and statem to shook 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:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans	
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<u>.</u>	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

2 Patrice McAllister		
Charter Communications	Last 4 digits of account number 4819	\$284.9
Nonpriority Creditor's Name Attn: Bankrutpcy Dept. 400 Atlantic Street, 10th Floor	When was the debt incurred?	
Stamford, CT 06901	As at the date way file the plaint is Obsal all that such	
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	Пол	
_	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 debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Account	
Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number 2170	\$7,412.3
Attn: Bankruptcy Dept. P.O. Box 15316	When was the debt incurred?	
Wilmington, DE 19850-5316 Number Street City State Zip Code	As of the date you file the plain in Obselve II that such	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	По и	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
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 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 or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card - Collection	
EAMC	Last 4 digits of account number 4243	\$17.2
Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred?	
2000 Pepperell Parkway		
Opelika, AL 36801	_	
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 unsecured claim:	
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 or profit-sharing plans, and other similar debts	
l Yes	Other. Specify Medical	

Intuit Payment Solutions	Last 4 digits of account number 1002	\$50,122.00
Nonpriority Creditor's Name 124 Chestnut St. Philadelphia, PA 19106	When was the debt incurred?	
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 claim:	
☐ 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 or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection	
Justice Of The Peace Court Precinct No 5	Last 4 digits of account number 9996	\$317.90
Nonpriority Creditor's Name Travis County Courthouse P.O. Box 1748	When was the debt incurred?	
Austin, TX 78767 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 unsecured claim:	
☐ 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 or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Business Debt - Taxes	
Midland Credit Management, Inc.	Last 4 digits of account number	\$8,360.00
Nonpriority Creditor's Name 2365 Northside Drive, Suite 300 San Diego, CA 92108	When was the debt incurred?	
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 claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection Account	

Patrice McAllister	Case number (if known)	
Rising Starz	Last 4 digits of account number	\$8,080.2
Nonpriority Creditor's Name 2140 H East University Drive Auburn, AL 36830	When was the debt incurred?	
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	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ 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	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Southern Head & Neck Surgery	Last 4 digits of account number 6474	\$35.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. 3368 US-280 G15	When was the debt incurred?	
Alexander City, AL 35010 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 claim:	
☐ 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	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Synchrony Bank	Last 4 digits of account number 9090	\$2,010.21
Nonpriority Creditor's Name Attn: Bankruptcy Dept. P O Box 965060	When was the debt incurred?	
Orlando, FL 32896-5060 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 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	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card - Collection	

Synahrany Bank/Lawaa		¢4 002 0
Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number 6880	\$1,883.0
Attn: Bankruptcy Dept. P O Box 965005	When was the debt incurred?	
Orlando, FL 32896	_	
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	
	П	
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:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
Γhe Orthopaedic Clinic	Last 4 digits of account number 9957	\$129.4
Nonpriority Creditor's Name	Last 4 digits of account number 9957	φ123.4
PO Box 1870	When was the debt incurred?	
Cary, NC 27512-1870	-	
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 claim: ☐ Student loans	
☐ Check if this claim is for a community	_	
s 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 or profit-sharing plans, and other similar debts	
⊒ Yes	■ Other. Specify Medical	
Jtah Higher Ed/Dept of Ed Nonpriority Creditor's Name	Last 4 digits of account number 0010	\$1,769.0
Attn: Bankruptcy Dept.	When was the debt incurred?	
Salt Lake City, UT 84114	_	
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.	П	
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:	
Check if this claim is for a community	■ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?		
s the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	

Case number (if known)	
Last 4 digits of account number 0009	\$1,375.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
□ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Other. Specify	
Student Loan	
Last 4 digits of account number 0008	\$1,772.0
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
unity Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify	
Student Loan	
Last 4 digits of account number 0007	\$1,375.0
When was the debt incurred?	
As of the date you file the plain in Check all that apply	
_	
-	
☐ Disputed Type of NONPRIORITY unsecured claim:	
rype of NONPRIORITY unsecured claim:	
Object to a second	
■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not	
Inity Student loans	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student Loan Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student Loan Last 4 digits of account number Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student Loan Last 4 digits of account number Other. Specify Student Loan

Jtah Higher Ed/Dept of Ed	Last 4 digits of account number 0006	\$7,451.00
Ionpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 145122	When was the debt incurred?	
Salt Lake City, UT 84114 Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneon all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\operatorname{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
lebt s 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 or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	Student Loan	
Jtah Higher Ed/Dept of Ed Ionpriority Creditor's Name	Last 4 digits of account number 0005	\$5,500.00
Attn: Bankruptcy Dept. PO Box 145122	When was the debt incurred?	
Salt Lake City, UT 84114 Jumber 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	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
lebt s 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 or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	Student Loan	
Jtah Higher Ed/Dept of Ed Ionpriority Creditor's Name	Last 4 digits of account number 0002	\$6,594.00
Attn: Bankruptcy Dept. PO Box 145122	When was the debt incurred?	
Salt Lake City, UT 84114 Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.	The state of the s	
Debtor 1 only Debtor 2 only	☐ Contingent	
	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?		
s the claim subject to offset? ■ _{No}	☐ Debts to pension or profit-sharing plans, and other similar debts	

Utah Higher Ed/Dept of Ed	Last 4 digits of account number 0001	\$4,500.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 145122	When was the debt incurred?	
Salt Lake City, UT 84114 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 ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loansObligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
	Student Loan	
Vik Medical Nonpriority Creditor's Name	Last 4 digits of account number	\$46.0
6836 Bee Caves Road #112 Austin, TX 78746	When was the debt incurred?	
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 claim:	
☐ 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	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Collection	
Wells Fargo Card Service	Last 4 digits of account number 0149	\$25,561.0
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 14517	When was the debt incurred?	
Des Moines, IA 50306 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 claim:	
☐ 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 or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card - Collection	

	or 2 Patrice McAllister	Case number (if known)	
4.2 9	Westlake Dermatology	Last 4 digits of account number XX17	\$43.00
3	Nonpriority Creditor's Name 327 E Cesar Chavez St. Austin, TX 78701	When was the debt incurred?	
	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 claim:	
	☐ 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 or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Collection	
4.3 0	wow	Last 4 digits of account number	\$128.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 4350	When was the debt incurred?	
	Carol Stream, IL 60197-4350 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 claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
is t hav	e this page only if you have others to be notified rying to collect from you for a debt you owe to	a about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a co someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Sir hat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional pe	milarly, if you
	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ital Management Services 1/2 South Ogden Street	Line 4.9 of (Check one):	
	falo, NY 14206-2317	■ Part 2: Creditors with Nonpriority Unsecured Claims	
		Last 4 digits of account number 8735	
Con	e and Address asolidated Recovery Group	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one):	
402		■ Part 2: Creditors with Nonpriority Unsecured Claims	
ESC	ondido, CA 92025-4843	Last 4 digits of account number 1002	
	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	dit Management 0 Tennyson Parkway, Suite 100	Line 4.30 of (Check one): Part 1: Creditors with Priority Unsecured Claims	
	no, TX 75024	Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number xx66	
NIe:	and Address		
ivame	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 15 of 17

Debtor 1 Charles McAllister Patrice McAllister		Case number (if known)
Hon. David A. Escamilla Travis County Attorney P.O. Box 1748	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Austin, TX 78767	Last 4 digits of account number	9996
Name and Address Merchants and Professionals PO Box 140675 Austin, TX 78714	On which entry in Part 1 or Part 2 die Line 4.29 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	xx17
Name and Address Merchants and Professionals PO Box 140675 Austin, TX 78714	On which entry in Part 1 or Part 2 die Line 4.27 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	xx71
Name and Address Midland Credit Management Attn: Bankruptcy Dept. P.O. Box 60578 Los Angeles, CA 90060-0578	On which entry in Part 1 or Part 2 die Line 4.7 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	2900
Name and Address Midland Funding 2365 Northside Drive, Suite 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Sun Diego, SA 32100	Last 4 digits of account number	
Name and Address Radius Global Solution LLC P.O. Box 390846 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 die Line 4.6 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Scott & Associates, PC PO Box 115220 Carrollton, TX 75011-5220	On which entry in Part 1 or Part 2 die Line 4.16 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	0750
Name and Address Sunrise Credit Services, Inc. Attn: Bankruptcy Dept. P.O. Box 9100 Farmingdale, NY 11735-9100	On which entry in Part 1 or Part 2 die Line 4.8 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0452
Name and Address United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197	On which entry in Part 1 or Part 2 did Line <u>2.5</u> of (<i>Check one):</i>	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197	On which entry in Part 1 or Part 2 die Line 2.6 of (<i>Check one</i>):	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address United States Attorney Attn: IRS Representative	On which entry in Part 1 or Part 2 did Line 2.7 of (<i>Check one</i>):	d you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 16 of 17

Debtor 1 Charles McAllister Debtor 2 Patrice McAllister		Case number (if known)			
P.O. Box 197 Montgomery, AL 36101-0197	Last 4 digits of account number				
Name and Address United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197	On which entry in Part 1 or Part 2 or Line 2.8 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
montgomery, AL 30101 0137	Last 4 digits of account number				
Name and Address United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197	On which entry in Part 1 or Part 2 or Line 2.9 of (<i>Check one</i>):	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
monigonicity, AL 30101 0101	Last 4 digits of account number				
Name and Address United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197	On which entry in Part 1 or Part 2 or Line 2.10 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
monigonicity, AL 30101 0101	Last 4 digits of account number				
Name and Address Zarzaur & Schwartz, P.C. P.O. Box 11366 Birmingham, AL 35202	On which entry in Part 1 or Part 2 or Line 4.7 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
3 ,	Last 4 digits of account number	2900			

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
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	16,244,632.52
	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.	\$	16,244,632.52
					Total Claim
Total	6f.	Student loans	6f.	\$	30,336.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims 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.	\$	169,096.65
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	199,432.65

Fill in this information to identify your case:						
Debtor 1	Charles McAllister					
	First Name	Middle Name	Last Name			
Debtor 2	Patrice McAllister	•				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	ALABAMA			
Case number (if known)					_	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

- 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.

-	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	Only		Otato	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- iii		Ciaio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Fill in this	information to identify your	case:		
Debtor 1	Charles McAllist	er		
	First Name	Middle Name	Last Name	
Debtor 2	Patrice McAlliste	Middle Name	Lost Name	
(Spouse if, filing	ng) First Name		Last Name	
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	ALABAMA	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		labtara		
Sched	lule H: Your Cod	eptors		12/15
ill it out, a our name	and number the entries in the and case number (if known	boxes on the left. Attacl). Answer every question	h the Additional Page t n.	tion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.
■ No				
☐ Yes	3			
Arizon No.	hin the last 8 years, have yo na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	uerto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form out Co	2 again as a codebtor only	if that person is a guarar I Form 106E/F), or Sched	ntor or cosigner. Make	rif your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil **Column 2: The creditor to whom you owe the debt Check all schedules that apply:
				_
3.1	Nama			Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	
	City	State	ZIF Code	
				_
3.2	Name			Schedule D, line
	INGING			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street	State	710.0040	
	City	State	ZIP Code	

Sill	in this information to identify your	casa:				I			
	otor 1 Charles M								
	potor 2 Patrice Mo	Allister							
Uni	ted States Bankruptcy Court for the	ne: MIDDLE DISTRICT C	F ALABAMA		_				
	se number nown)					• • • • • • • • • • • • • • • • • • • •	d filing ent show	ing postpetition ch	napter
0	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	come							12/15
sup spo atta Par	as complete and accurate as popularing correct information. If you are separated and you have a separated and you have a separate sheet to this form	u are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your s th you, do not inclu	spouse de infor	is liv mati	ing with you, inclu on about your spo	ude info ouse. If r	rmation about you nore space is ne	our eded,
1.	Fill in your employment information.	Debtor 1			Debtor 2	or non-	-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	■ Employed			■ Emplo	oyed		
	information about additional employers.		☐ Not employed			☐ Not e	mployed		
	Include part-time, seasonal, or	Occupation				Teache	r		
	self-employed work.	Employer's name				Opelika	City S	chools	
	Occupation may include studen or homemaker, if it applies.	t Employer's address				P.O. Bo Opelika		8803-2469	
		How long employed t	here?				years		
Par	Give Details About M	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	eport for	any	ine, write \$0 in the	space. I	nclude your non-fi	iling
	u or your non-filing spouse have to space, attach a separate sheet		ombine the information	n for all e	emplo	oyers for that perso	n on the	lines below. If you	u need
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	4,182.33	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	0.00	

4. Calculate gross Income. Add line 2 + line 3.

0.00

4,182.33

Debtor 1 Charles McAllister
Patrice McAllister

Case number (if known)

				For	Debtor 1		btor 2 or	
	Сору	y line 4 here	4.	\$	0.00	\$	4,182.33	
5.	List a	all payroll deductions:						
-	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	522.29	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Local Tax	5h.+	\$	0.00	- \$	62.73	
		Teacher's Retirement	_	\$	0.00	\$	250.94	
		AEA - Active		\$	0.00	\$	40.25	
		FLEXOPTNAL		\$	0.00	\$	50.00	
		FLEXPEEHIP	_	\$	0.00	\$	291.65	
		Sams Club	_	\$	0.00	\$	7.50	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	1,225.36	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	2,956.97	
8.	List a	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	0.5	•		•	2.22	
	Oh	monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	400.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e. 8f.	Social Security 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.	8e.	\$	0.00	\$	0.00	
		Specify:	_ 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Daughter pays car payment	_ 8h.+	\$	0.00	- \$	206.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	400.00	\$	206.00	
10	Calci	ulate monthly income. Add line 7 + line 9.	10. \$		400.00 + \$	3,162	.97 = \$	3,562.97
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			400.00	3,102	<u>,</u>	3,30 <u>2</u> .37
11.	Include other	e all other regular contributions to the expenses that you list in Schedule and de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a sify:	depend	-			edule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					Combin	3,562.97 ed income
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	?				v.iiiiy	
		Yes. Explain: Daughter reimburses \$400.00 per month for car p	ayme	nt an	d insurance.			

	in this informa	ation to identify yo	our occo:			1		
Deb	tor 1	Charles McA	Allister				k if this is: An amended filing	
	tor 2 ouse, if filing)	Patrice McA	llister				A supplement show	ving postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the	: MIDDL	E DISTRICT OF ALABAM	Α	ī	MM / DD / YYYY	
1	e number nown)							
Ol	fficial Fo	rm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Par		ribe Your House	ehold					
1.	Is this a joir							
	□ No. Go to		in a senar	ate household?				
	= 103. 20 0		пт и осриг	ate nousenoia.				
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		14	□ No ■ Yes
					Daughter		20	□ No ■ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	nan _—	No Yes				
Par	t 2: Estim	ate Your Ongoi	ing Monthi	y Expenses				
exp	imate your ex enses as of a dicable date.	xpenses as of year date after the	our bankr bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second of the sec	orm as a supe <i>J</i> , check the	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
				government assistance i				
(Off	ficial Form 10)6I.)					Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4. \$		1,700.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	•	rty, homeowner's	-			4b. \$		20.00
		maintenance, re owner's associa		upkeep expenses		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Deb	otor 1	Charles	McAllister			
Deb	tor 2	Patrice I	McAllister	Case num	ber (if known)	
6.	Utilit	ios:				
0.	6a.		, heat, natural gas	6a.	\$	275.00
	6b.	•	wer, garbage collection	6b.	·	65.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	·	479.00
	6d.	Other. Sp	ecify:	6d.	\$	0.00
7.	Food		ekeeping supplies		\$	300.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	10.00
10.	Pers	onal care p	products and services	10.	\$	10.00
11.	Medi	ical and de	ntal expenses	11.	\$	0.00
12.			. Include gas, maintenance, bus or train fare.	40	•	100.00
40			ar payments.	12.		
		•	clubs, recreation, newspapers, magazines, and books	13.	·	50.00
			ributions and religious donations	14.	\$	0.00
15.		rance.	nsurance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.	\$	0.00
		Health ins		15b.		0.00
		Vehicle in		15c.	·	205.00
			rance. Specify:	15d.	·	0.00
16.			include taxes deducted from your pay or included in lines 4 or 20.		-	<u> </u>
	Spec		, , , , , , , , , , , , , , , , , , ,	16.	\$	0.00
17.			ease payments:			
	17a.	Car paym	ents for Vehicle 1	17a.	·	206.00
			ents for Vehicle 2	17b.		0.00
		Other. Sp		17c.	·	0.00
		Other. Sp	•	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form 106I). s you make to support others who do not live with you.	10.	\$	0.00
15.	Spec		s you make to support others who do not live with you.	19.	Ψ	0.00
20.		·	erty expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
			s on other property	20a.		0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	Grooming	21.	+\$	25.00
22	Calc	ulate vour	monthly expenses			
22.			through 21.		\$	3,445.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,443.00
			a and 22b. The result is your monthly expenses.		\$	3,445.00
	220. /	Add IIIIC ZZ	a and 22b. The result is your monthly expenses.		Ψ	3,445.00
23.			monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.		3,562.97
	23b.	Copy you	monthly expenses from line 22c above.	23b.	-\$	3,445.00
	00-	Cb	from the control of t			
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	117.97
		THE TESUN	na your monuny necinoonie.			
24.	Do y	ou expect	an increase or decrease in your expenses within the year after yo	u file this	form?	
			ou expect to finish paying for your car loan within the year or do you expect your	mortgage	payment to inci	rease or decrease because of a
			terms of your mortgage?			
	■ No		[=			
	☐ Ye	es.	Explain here:			

Fill in this infan	matian to identify your			
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles McAlliste		Look Nome	
Dobtor 2		Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Patrice McAlliste	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	ALABAMA	_
Case number				
(if known)				☐ Check if this is an amended filing
Official Forr	-			
Declarat	tion About a	ın Individual	Debtor's Schedule	S 12/15
obtaining mone years, or both. 1		n connection with a bank		se statement, concealing property, or \$250,000, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy for	ms?
■ No				
☐ Yes. I	Name of person			ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with this de	claration and
X /s/ Cha	arles McAllister		X /s/ Patrice McAllister	
	s McAllister		Patrice McAllister	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _	June 17, 2020		Date June 17, 2020	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:				
De	btor 1	Charles McAllist		Last Mana			
DΔ	btor 2	First Name Patrice McAlliste	Middle Name	Last Name			
_	ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF A	LABAMA			
Ca	se number						
(if kı	nown)				_	theck if this is an	
					a	mended filing	
\bigcap f	ficial Ea	rm 107					
	ficial Fo		Affairs for Individ	duals Filing for B	ankruntov	4/4.0	
						4/19	
					equally responsible for sup additional pages, write you		
nun	nber (if know	n). Answer every que	stion.				
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before			
1.	What is you	r current marital statu	ıs?				
	Married						
	■ Not mar						
2.	During the I	ast 3 years have you	lived anywhere other than	where you live now?			
۷.	During the i	ast 5 years, have you	iived allywhere other than	where you live now:			
	■ No						
	☐ Yes. Lis	t all of the places you l	<i>'</i> .				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there	
2	Within the Is	est 8 years, did you o		ral equivalent in a commun	ity proporty state or territory		
3. stat					ity property state or territory co, Texas, Washington and W		
	■ No						
	■ No □ Yes. Ma	ake sure vou fill out <i>Sch</i>	hedule H: Your Codebtors (Of	fficial Form 106H).			
		and date you iii dat dor	Todalo II. Toda Godobioro (Gi	molar rollin room,			
Pa	rt 2 Explai	n the Sources of You	r Income				
4.			nployment or from operating used in the control of		ear or the two previous caler	ndar years?	
		•	have income that you receive	• .			
	□ No						
	Yes. Fill	I in the details.					
			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources of income	Gross income	
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions	
_			_	exclusions)		and exclusions)	
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$20,911.65	
			Operating a business		☐ Operating a business		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				Debtor 1					Debtor 2			
					of income that apply.		income e deductions and ions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last calen inuary 1 to	dar year: December	31, 2019)	☐ Wages bonuses,	s, commissions, tips		\$15,229.00		■ Wages, combonuses, tips	missions,	\$51,240.00	
				Opera	ting a business				☐ Operating a	business		
		dar year be December		☐ Wages bonuses,	s, commissions, tips		\$37,813.00		■ Wages, combonuses, tips	missions,	\$42,867.00	
				■ Opera	ting a business				Operating a	business		
	■ No	source and t	Ü	Debtor 1	ach source separa	tely. Do n	ot include income		you listed in lin	ne 4.		
					of income below.	each s	income from source e deductions and ions)	!	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankrupt	су					
6.	Are either ☐ No.	Neither De	ebtor 1 nor D	ebtor 2 ha	imarily consume s primarily consu amily, or househo	umer deb		ebts a	re defined in 11	U.S.C. § 10°	1(8) as "incurred by an	
		□ No. □ Yes	Go to line 7 List below e paid that cr not include	each credito editor. Do r payments t		id a total onts for dor	of \$6,825* or more nestic support ob uptcy case.	re in c	one or more pay ons, such as ch	rments and thillid support a	ne total amount you nd alimony. Also, do	
	■ Yes.				e primarily consu for bankruptcy, di			otal of	f \$600 or more?	,		
		□ No.	Go to line 7									
		■ Yes		ments for d							creditor. Do not nclude payments to an	
	Creditor'	s Name and	d Address		Dates of payme	ent	Total amount paid	4	Amount you still owe	Was this p	payment for	
		on Federal Inkruptcy	Credit Uni Dept.	on	Monthly		\$618.00		\$6,732.00	☐ Mortgag	ре	

P.O. Box 1432

Alexandria, VA 22313-2032

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Credit Card

☐ Other__

☐ Loan Repayment ☐ Suppliers or vendors

insider? Include payments on debts guaranteed or cosigned by an insider. No	Debtor 1 Debtor 2			Cas	se number (if known)		
Yes. List all payments to an incider.	<i>Insic</i> of wl a bu	ders include your relatives; any general pa hich you are an officer, director, person in siness you operate as a sole proprietor. 1	artners; relatives of any ger a control, or owner of 20% of	neral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment Still owe Still owe		No					
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited a insider? Include payments on debts guaranteed or cosigned by an insider. No		Yes. List all payments to an insider.					
insider? Include payments on debts guaranteed or cosigned by an insider. No	Insi	ider's Name and Address	Dates of payment			Reason for	this payment
Yes, List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you still owe Reason for this payment Include creditor's name Reason for this payment Reason for this payment Include creditor's name Reason for this payment Reason for this	insi	der?		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such maters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No							
Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No	Insi	ider's Name and Address	Dates of payment		•		
9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No	Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures	,			
Yes. Fill in the details. Case title Case number Travis County, et al v. Buillion Direct, Inc. J5-CV-18-249996 Collection Midland Credit Management v. Patrice McAllister 43-CV-2020-900029.00 Collection Circuit Court of Lee County, Alabama 2311 Gateway Drive Opellika, AL 36801 Concluded No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Describe the action the creditor took Date action was taken Amount-appointed receiver, a custodian, or another official? No. Yes. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?	List a mod	all such matters, including personal injury ifications, and contract disputes.					
Case number Travis County, et al v. Buillion Direct, Inc. J5-CV-18-249996 Midland Credit Management v. Patrice McAllister 43-CV-2020-900029.00 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Possible for you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Describe the action the creditor took Date action was taken Amount taken Amount taken Amount taken No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount taken Amount taken No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount taken No. Yes. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
Direct, Inc. J5-CV-18-249996 Precinct No 5 Travis County Courthouse P.O. Box 1748 Austin, TX 78767 Midland Credit Management v. Patrice McAllister 43-CV-2020-900029.00 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount taken Amount taken No. Yes. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?			Nature of the case	Court or agency		Status of th	e case
Patrice McAllister 43-CV-2020-900029.00 Alabama 2311 Gateway Drive Opelika, AL 36801 Describe the Property Explain what happened Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Yes. Fill in the details. Creditor Name and Address Describe the Property Explain what happened Date Value of the property Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes	Dir	ect, Inc.	Collection	Precinct No 5 Travis County Courthouse P.O. Box 1748		☐ On appeal	
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes	Pat	trice McAllister	Collection	Alabama 2311 Gateway	Drive	On appe	al
Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes		ck all that apply and fill in the details belo No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?
propert Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes	Cre		Describe the Property		Date		Value of the
Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes			. ,	d			property
taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes	acco	ounts or refuse to make a payment bed No	ptcy, did any creditor, inc		nancial institution	n, set off any a	mounts from your
 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 	Cre	editor Name and Address	Describe the action the	e creditor took			Amount
☐ Yes				erty in the possess			fit of creditors, a
	_		mont of Einanaial Affaira for	ndividuala Eiliaa (c. '	Pankruptov		page \$

	otor 1 Charles McAllister otor 2 Patrice McAllister		Case number	(if known)						
ar	t 5: List Certain Gifts and Contributions	s								
		uptcy,	did you give any gifts with a total value of more t	han \$600 per person	?					
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	0	Describe the gifts	Dates you gave the gifts	Value					
	Address:									
4.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.									
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value					
Par	t 6: List Certain Losses									
5.	or gambling?	ptcy or	since you filed for bankruptcy, did you lose anyt	thing because of the	ft, fire, other disaster,					
	☐ Yes. Fill in the details. Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property					
	how the loss occurred	Include	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost					
ar	t 7: List Certain Payments or Transfers	;								
6.	consulted about seeking bankruptcy or pr	orepari	id you or anyone else acting on your behalf pay on gabankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you					
	□ No									
	Yes. Fill in the details.		Description and advantage of	D-1	A					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Marrell J. McNeal, Attorney At Law, P.C. P.O. Box 308 Opelika, AL 36803-0308		Attorney Fee - \$1500.00 Credit Counseling - \$25.00 Filing Fee - \$335.00	6-17-2020	\$1,860.00					
7.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	litors o		or transfer any prope	rty to anyone who					
	■ No									
	☐ Yes. Fill in the details.									
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment					

Debtor Debtor			Ca	se number (if known)			
trai Incl incl	thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers rude gifts and transfers that you have alread	business or financial at made as security (such as	ffairs? s the granting of a sec				
	Yes. Fill in the details.						
Ac	erson Who Received Transfer		Description and value of property transferred		Date transfer was made		
Va 13 Au	erson's relationship to you alue Ride 36 Opelika Road uburn, AL 36830 one	2001 Lexus ES	5300	\$1,500.00	May, 2019		
Be 71 Ri	enjamin Ashton 5 Shenandoah Dr. chmond, TX	2000 Toyota L	and Cruiser	\$5,000.00	09/12/2019		
	one neryl Huseman	Term Life Insu	urance Policy	\$0.00	June, 2020		
34	Carlisle Place oring, TX 77382	Term Ene moe	nance i oney	ψο.οσ	bulle, 2020		
De	ebtor 1's mother						
ber □ ■	thin 10 years before you filed for bankruneficiary? (These are often called asset-panalon No Yes. Fill in the details.	protection devices.)	any property to a seli		e of which you are a Date Transfer was		
Es	scondida Family Living Trust		ma 00 per year from 2006-2014 for payment of life Se				
Part 8:	List of Certain Financial Accounts, I	insurance poli		ge Units			
20. Wit sol Inc	hin 1 year before you filed for bankrup d, moved, or transferred? lude checking, savings, money market uses, pension funds, cooperatives, ass No Yes. Fill in the details.	tcy, were any financial a	accounts or instrume	ents held in your name, or for	• • •		
	nme of Financial Institution and Idress (Number, Street, City, State and ZIP de)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
20	ell Fargo Bank 101 E University Drive uburn, AL 36830	XXXX-1861	■ Checking □ Savings □ Money Market □ Brokerage □ Other	January, 2020	Unknown		

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.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?							
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility	Who else has or had access	Describe the contents	Do you still							
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	bescribe the contents	have it?							
Par	t 9: Identify Property You Hold or Control for	Someone Else									
2	Do you hold or control any property that someo	ne else owns? Include any proper	ty you borrowed from, are storing for	or hold in trust							
_0.	for someone.	inc cise owner. Include any proper	ty you borrowed from, are storing for	, or more in trust							
	■ No										
	Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value							
Par	t 10: Give Details About Environmental Informa	ation									
-or	the purpose of Part 10, the following definitions	арріу:									
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- •								
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	aw, whether you now own, operate, o	or utilize it or used							
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,							
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.								
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?							
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
25.	Have you notified any governmental unit of any	release of hazardous material?									
	■ No										
	Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice							
		ZIP Code)									

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Charles McAllister Patrice McAllister		Case number (if known)		
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any envi	rironmental law? Include settlements and orders.		
	_	No Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of the case	е	
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	Withi	n 4 years before you filed for bankrup	otcy, did you own a business or have ar	ny of the following connections to any business?		
		A sole proprietor or self-employed	in a trade, profession, or other activity,	, either full-time or part-time		
		☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	nip (LLP)		
		☐ A partner in a partnership				
		☐ An officer, director, or managing e	xecutive of a corporation			
		☐ An owner of at least 5% of the voti	ng or equity securities of a corporation			
		No. None of the above applies. Go to	Part 12.			
	_		II in the details below for each business	s.		
		iness Name	Describe the nature of the business	Employer Identification number		
	Address (Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper	Do not include Social Security number or ITIN.		
				Dates business existed		
28.		n 2 years before you filed for bankrup utions, creditors, or other parties.	etcy, did you give a financial statement	to anyone about your business? Include all financia	al .	
	_	•				
	_	No Yes. Fill in the details below.				
	— Nam		Date Issued			
	Add (Num	ress ber, Street, City, State and ZIP Code)				
Par		Sign Below				
ha are	ve rea true a	d the answers on this Statement of Fi	a false statement, concealing property,	nd I declare under penalty of perjury that the answer		
		okruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	\$250,000, or imprisonment for up to 20	D years, or both.		
		les McAllister	/s/ Patrice McAllister			
		McAllister e of Debtor 1	Patrice McAllister Signature of Debtor 2			
Dat	te J ı	une 17, 2020	Date June 17, 2020			
_	-	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 107)?		
■ N □ Y						
Did	you p	ay or agree to pay someone who is no	ot an attorney to help you fill out bankru	uptcy forms?		
■ N □ Y		ame of Person Attach the Rankr	uptcy Petition Preparer's Notice, Declarati	ion, and Signature (Official Form 119)		
_ '	JJ. 140	. Attach the Danki	apto, Foundit Fropardi S Noudo, Decidian	on, and dignature (emotion 110).		

Fill in this inform	nation to identify your	case:			
Debtor 1	Charles McAlliste				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Patrice McAlliste	Middle Name	Last Name		
, , , ,					
United States Bar	nkruptcy Court for the:	MIDDLE DISTRIC	OF ALABAMA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	rm 108				
Statemen	t of Intentio	n for Indiv	iduals Filing Un	der Chapter	7 12/15
			10.0.0.0	<u></u>	,.,
If you are an indiv	vidual filing under cha	pter 7, you must fil	I out this form if:		
creditors have	claims secured by yo	ur property, or			
	ed personal property a				
			you file your bankruptcy petiti e time for cause. You must als		
on the f	,	to obdit exterios tri	c time for dauge. For must als	o seria copies to the c	realiers and lessons you list
If two married per	ople are filing togethe	r in a joint case, bo	oth are equally responsible for	supplying correct info	rmation. Both debtors must
•	d date the form.	,	and oqually responsible to	eappi,g collect iii.c	
Be as complete a	nd accurate as possib	le. If more space is	s needed, attach a separate she	eet to this form. On the	e top of any additional pages.
	our name and case nur				o top or any additional pages,
Port 1: List Vo	our Creditors Who Have	a Sagurad Claima			
Part 1: List Yo	ur Creditors willo nav	e Secured Claims			
1. For any credito information be		art 1 of Schedule D	: Creditors Who Have Claims S	Secured by Property (C	Official Form 106D), fill in the
	ditor and the property t	hat is collateral	What do you intend to do wi secures a debt?	ith the property that	Did you claim the property as exempt on Schedule C?
Creditor's Pe	entagon Federal Cre	edit Union	☐ Surrender the property.		■ No
name:			☐ Retain the property and re	edeem it.	— NO
Description of	2045 Handa Assar	-1 40E 000	Retain the property and en		☐ Yes
	2015 Honda Accor miles	a 105,000	Reaffirmation Agreement.		
property securing debt:	Body Damage \$35		☐ Retain the property and [ex	kplain]:	
occuming acou	Daughter Drives &	Pays			
Part 2: List Yo	ur Unexpired Persona	I Property I eases			
For any unexpire	d personal property le	ase that you listed	in Schedule G: Executory Con	tracts and Unexpired	Leases (Official Form 106G), fill
			expired leases are leases that the trustee does not assume it		ease period has not yet ended.
D				v	Will the lease be assumed 2
Describe your ur	nexpired personal pro	perty leases		V	Vill the lease be assumed?
Lessor's name:				С	□ No
Description of lease	sed			-	-
Property:					Yes
Lessor's name:				г	□ No
Description of lease	sed				
Property:				С	☐ Yes

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Official Form 108

Best Case Bankruptcy

page 1

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Charles McAllister Debtor 2 Patrice McAllister	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention abou property that is subject to an unexpired lease.	ut any property of my estate that secures a debt and any personal
X /s/ Charles McAllister X	/s/ Patrice McAllister
Charles McAllister Signature of Debtor 1	Patrice McAllister Signature of Debtor 2
Date June 17, 2020	June 17, 2020

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

-···											
FIII I	n this infor	mation to identify your case:					ck one A-1Sup		irected	in this form and	in Form
Deb	tor 1	Charles McAllister				122	A-13up	μ.			
	otor 2	Patrice McAllister					■ 1. The	ere is no pres	umptior	n of abuse	
` `	use, if filing)] 2. The	e calculation to	o deteri	mine if a presum	notion of abuse
Unit	ed States I	Bankruptcy Court for the: Middle Distric	ct of Alab	oama			ар	plies will be m	nade un	nder <i>Chapter 7 N</i>	
Cas	e number						Cá	alculation (Offi	cial Fo	rm 122A-2).	
(if kno	own)									ot apply now be e but it could ap	
						I	☐ Che	ck if this is a	n ame	nded filing	
Off	ficial F	orm 122A - 1									
Ch	apter	7 Statement of Your (Curre	ent Mon	thl	y Inc	ome				04/20
attac case quali Pari	h a separate number (if I fying militar	and accurate as possible. If two married pe e sheet to this form. Include the line numbe known). If you believe that you are exempte ry service, complete and file Statement of E liculate Your Current Monthly Income	er to whice ed from a Exemption	h the additional presumption of	al info of abu	rmation a	pplies. C se you d	on the top of an onot have prin	ny additi narily co	ional pages, write onsumer debts o	e your name and r because of
1.		your marital and filing status? Check o	ne only.								
	_	arried. Fill out Column A, lines 2-11.									
	_	ed and your spouse is filing with you.				•	2-11.				
		ed and your spouse is NOT filing with	-								
	_	ng in the same household and are not		_							
	per	ng separately or are legally separated halty of perjury that you and your spouse ng apart for reasons that do not include e	are lega	lly separated	unde	r nonban	kruptcy	law that applic	es or the		
10 th	01(10A). For ne 6 months,	erage monthly income that you received fro example, if you are filing on September 15, the add the income for all 6 months and divide the the same rental property, put the income from	ne 6-mont e total by	n period would b 6. Fill in the resu	oe Ma ult. Do	rch 1 throu not includ	gh Augus e any inc	st 31. If the amo	ount of your	our monthly incom once. For example	e varied during le, if both
							Columr Debtor			mn B or 2 or filing spouse	
2.		ss wages, salary, tips, bonuses, overt ductions).	ime, and	d commissio	ns (b	efore all	\$	0.00	\$	4,182.33	
3.		and maintenance payments. Do not ind is is filled in.	clude pa	yments from a	spoi	use if	\$	0.00	\$	0.00	
4.	of you or from an u and room	nts from any source which are regula your dependents, including child sup nmarried partner, members of your hous mates. Include regular contributions from to not include payments you listed on line	p ort. Indicate in the second	clude regular o our dependen	contri ts, pa	butions arents,	\$	0.00	\$	0.00	
5.	Net incor	ne from operating a business, profess	sion, or								
			•	Debt							
		eipts (before all deductions)	\$		3.33						
	•	and necessary operating expenses	- \$		0.00	Сору					
	profession		\$	583	3.33	here -> S	S	583.33	\$	0.00	
6.	Net incor	ne from rental and other real property		Dalid	au 4						
	0	elate (hafana all da da et)		Debt \$ 0.00	OF T						
		reipts (before all deductions)		\$ 0.00							
	•	and necessary operating expenses nly income from rental or other real prope		· ———	Copy	here ->	\$	0.00	\$	0.00	
		, since it can be contained to a proper	, 4								

Official Form 122A-1

Best Case Bankruptcy

0.00

7. Interest, dividends, and royalties

0.00

Case number (if known)

				Column A Debtor 1		Column E Debtor 2 non-filing		
8.	Inemployment compensation			\$	0.00	\$	0.00	
I	Oo not enter the amount if you contend that the amount he Social Security Act. Instead, list it here:		efit under					
	For you \$. 0	.00					
	For your spouse \$.00					
 	Pension or retirement income. Do not include any and penefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, or Juited States Government in connection with a disability lisability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which you retired under any provision of title 10 other than chapter	stated in the next senter allowance paid by the ty, combat-related injuctes. If you received an pay only to the extent u would otherwise be	ence, do ne ury or ny retired that it	\$	0.00	\$	0.00	
10. I	ncome from all other sources not listed above. Spon not include any benefits received under the Social Stander the Federal law relating to the national emergency and the National Emergencies Act (50 U.S.C. 1601 eteroronavirus disease 2019 (COVID-19); payments receivarime, a crime against humanity, or international or donompensation pension, pay, annuity, or allowance paic Government in connection with a disability, combat-relates the page and put the total below	ecify the source and a Security Act; payments cy declared by the Pre et seq.) with respect to ived as a victim of a w mestic terrorism; or d by the United States ated injury or disability	s made esident o the var s					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	583.33	+ \$ _	4,182.33		4,765.66
Part 2	Determine Whether the Means Test Applies t	to You					incom	e
Part 2	Determine Whether the Means Test Applies to Calculate your current monthly income for the year						incom	e
12. (•	Follow these steps:		Сор	by line 11	here=>	\$	4,765.66
12. (Calculate your current monthly income for the year	Follow these steps:		Сор	by line 11	here=>		4,765.66
12. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line	T. Follow these steps:		Сор	by line 11		\$	4,765.66
12. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year)	r. Follow these steps:		Сој	by line 11		\$	4,765.66
12. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the	r. Follow these steps:		Сор	by line 11		\$	4,765.66
12. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to	e form you. Follow these steps:		Cop	by line 11		\$	4,765.66
13. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to fill in the state in which you live.	e form you. Follow these ste AL of household. online using the link s	pps:			1:	\$ x / 2b. \$	4,765.66
13. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to offill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of find a list of applicable median income amounts, go	e form you. Follow these ste AL of household. online using the link s	pps:			1:	\$ x	4,765.66 12 57,187.92
13. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size for find a list of applicable median income amounts, go or this form. This list may also be available at the bank	r. Follow these steps: 11 e form you. Follow these ste AL 4 of household. online using the link struptcy clerk's office. on the top of page 1, c	eps: specified i	in the sepa	rate instruc	1: tions	\$2b. \$	4,765.66 12 57,187.92
13. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to go a comparison of people in your household. Fill in the number of people in your household. Fill in the median family income for your state and size for find a list of applicable median income amounts, go for this form. This list may also be available at the bank flow do the lines compare? 4a. Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official 4b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	r. Follow these steps: 11 you. Follow these ste AL 4 of household. online using the link struptcy clerk's office. on the top of page 1, c. Form 122A-2.	eps: specified i	in the sepa	rate instruc	1: tions	\$	4,765.66 12 57,187.92 82,991.00
13. (Calculate your current monthly income for the year 2a. Copy your total current monthly income from line of Multiply by 12 (the number of months in a year) 2b. The result is your annual income for this part of the Calculate the median family income that applies to go a comparison of people in your household. Fill in the number of people in your household. Fill in the median family income for your state and size for find a list of applicable median income amounts, go for this form. This list may also be available at the bank flow do the lines compare? 4a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 4b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	e form you. Follow these steps: AL of household. online using the link struptcy clerk's office. on the top of page 1, c. Form 122A-2. of page 1, check box 2	eps: specified i heck box 2, <i>The pre</i>	in the sepa 1, <i>There is</i> esumption o	rate instruc no presun	1: tions nption of abo	\$	4,765.66 12 57,187.92 82,991.00

Best Case Bankruptcy

Debtor 1 Debtor 2	Patrice McAllister	Case number (if known)		
	Charles McAllister Signature of Debtor 1		Patrice McAllister Signature of Debtor 2	
Da	te June 17, 2020 MM / DD / YYYY	Date	June 17, 2020 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.		

ebtor 1	Charles McAllister		
	Patrice McAllister	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2019 to 05/31/2020.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Consultant Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	12/2019	\$0.00	\$0.00	\$0.00
5 Months Ago:	01/2020	\$0.00	\$0.00	\$0.00
4 Months Ago:	02/2020	\$0.00	\$0.00	\$0.00
3 Months Ago:	03/2020	\$0.00	\$0.00	\$0.00
2 Months Ago:	04/2020	\$0.00	\$0.00	\$0.00
Last Month:	05/2020	\$3,500.00	\$0.00	\$3,500.00
_	Average per month:	\$583.33	\$0.00	
			Average Monthly NET Income:	\$583.33

Best Case Bankruptcy

Desc Main

	- 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	`	
Debtor 2	Patrice McAllister	Case number (if known)	
Debtor 1	Charles McAllister		

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 12/01/2019 to 05/31/2020.

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

Source of Income: Employer: Opelika City Schools

Constant income of \$4,182.33 per month.*

Best Case Bankruptcy

Debtor 1	Charles McAllister		
	Patrice McAllister	Case number (if known)	

*Paycheck Details:

Opelika City Schools

Date	Earnings	Overtime	Taxes	Other	Net Check
2019-12-20	4,182.33	0.00	522.58	710.92	2,948.83
2020-01-31	4,182.33	0.00	518.15	755.92	2,908.26
2020-02-28	4,182.33	0.00	518.15	710.92	2,953.26
2020-03-31	4,182.33	0.00	524.95	680.22	2,977.16
2020-04-30	4,182.33	0.00	524.95	680.22	2,977.16
2020-05-29	4,182.33	0.00	524.95	680.22	2,977.16
Totals:	25,093.98	0.00	3,133.73	4,218.42	17,741.83

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

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

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee total fee \$1,717

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. 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.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Alabama

In	Charles McAllister Patrice McAllister		Case No.					
	ratifice wichinstel	Debtor(s)	Chapter	7				
				IDEOD (C)				
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DE	CBTOR(S)				
1.	compensation paid to me within one year before the filing	ant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to idered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,500.00				
	Prior to the filing of this statement I have received			1,500.00				
	Balance Due		\$	0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed compen	nsation with any other person	unless they are memb	pers and associates of my law firm				
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name	ion with a person or persons ves of the people sharing in the	who are not members compensation is atta	or associates of my law firm. A ched.				
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspec	ts of the bankruptcy c	ase, including:				
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, staterc. Representation of the debtor at the meeting of creditors	ment of affairs and plan which	n may be required;					
	 d. [Other provisions as needed] Negotiations with secured creditors to re-reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on house 	is as needed; preparation						
5.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions or				
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in				
	June 17, 2020	/s/ Marrell J. McN						
Date		Signature of Attorne	I ASB-2160-L58M ey I, Attorney At Law	, PC				
		Opelika, AL 3680 334-745-7033 Fa marrell@marrellr	x: 334-745-7043					
		Name of law firm						

United States Bankruptcy Court Middle District of Alabama

In re	Charles McAllister Patrice McAllister		Case No.	
		Debtor(s)	Chapter	7
Γhe ab		IFICATION OF CREDITOR that the attached list of creditors is true and c		of their knowledge.
Date:	June 17, 2020	/s/ Charles McAllister		
		Charles McAllister		
		Signature of Debtor		
Date:	June 17, 2020	/s/ Patrice McAllister		
		Patrice McAllister		
		Signature of Debtor		

Charles McAllister Patrice McAllister 1550 Opelika Road, Suite 6 #143 Auburn, AL 36830

Advantage Chiropractic Clinic 2408 East University Drive, Suite 101 Auburn, AL 36830-9404

Alabama Department Of Revenue 50 N Ripley Street Montgomery, AL 36130

American Express Attn: Bankruptcy Dept. P.O. Box 981537 El Paso, TX 79998

Auburn Pediatric And Adult Medicine Attn: Bankruptcy Dept. 2353 Bent Creek Road, Suite 110 Auburn, AL 36830-9421

Bank Of America Attn: Bankruptcy Dept. P.O. Box 982235 El Paso, TX 79998-2235

Capital Management Services 698 1/2 South Ogden Street Buffalo, NY 14206-2317

Capital One Bank USA NA Attn: Bankruptcy Dept. P.O. Box 85015 Richmond, VA 23285-5075 Capital One Bank USA NA Attn: Bankruptcy Dept. P.O. Box 30281 Salt Lake City, UT 84130

Charter Communications Attn: Bankrutpcy Dept. 400 Atlantic Street, 10th Floor Stamford, CT 06901

Consolidated Recovery Group 1835A S Centre City Pkwy., Suite 402 Escondido, CA 92025-4843

Credit Management 6080 Tennyson Parkway, Suite 100 Plano, TX 75024

Discover Financial Attn: Bankruptcy Dept. P.O. Box 15316 Wilmington, DE 19850-5316

EAMC Attn: Bankruptcy Dept. 2000 Pepperell Parkway Opelika, AL 36801

Hon. David A. Escamilla Travis County Attorney P.O. Box 1748 Austin, TX 78767

Internal Revenue Service Attn: Bankruptcy Dept. P.O. Box 7346 Philadelphia, PA 19101-7346 Intuit Payment Solutions 124 Chestnut St. Philadelphia, PA 19106

Justice Of The Peace Court Precinct No 5 Travis County Courthouse P.O. Box 1748 Austin, TX 78767

Merchants and Professionals PO Box 140675 Austin, TX 78714

Midland Credit Management Attn: Bankruptcy Dept. P.O. Box 60578 Los Angeles, CA 90060-0578

Midland Credit Management, Inc. 2365 Northside Drive, Suite 300 San Diego, CA 92108

Midland Funding 2365 Northside Drive, Suite 300 San Diego, CA 92108

Pentagon Federal Credit Union Attn: Bankruptcy Dept. P.O. Box 1432 Alexandria, VA 22313-2032

Radius Global Solution LLC P.O. Box 390846 Minneapolis, MN 55439

Rising Starz 2140 H East University Drive Auburn, AL 36830 Scott & Associates, PC PO Box 115220 Carrollton, TX 75011-5220

Southern Head & Neck Surgery Attn: Bankruptcy Dept. 3368 US-280 G15 Alexander City, AL 35010

Sunrise Credit Services, Inc. Attn: Bankruptcy Dept. P.O. Box 9100 Farmingdale, NY 11735-9100

Synchrony Bank Attn: Bankruptcy Dept. P O Box 965060 Orlando, FL 32896-5060

Synchrony Bank/Lowes Attn: Bankruptcy Dept. P O Box 965005 Orlando, FL 32896

The Orthopaedic Clinic PO Box 1870 Cary, NC 27512-1870

United States Attorney Attn: IRS Representative P.O. Box 197 Montgomery, AL 36101-0197

United States District Court 501 West Fifth Street, Suite 1100 Austin, TX 78701 Utah Higher Ed/Dept of Ed Attn: Bankruptcy Dept. PO Box 145122 Salt Lake City, UT 84114

Vik Medical 6836 Bee Caves Road #112 Austin, TX 78746

Wells Fargo Card Service Attn: Bankruptcy Dept. PO Box 14517 Des Moines, IA 50306

Westlake Dermatology 327 E Cesar Chavez St. Austin, TX 78701

WOW Attn: Bankruptcy Dept. PO Box 4350 Carol Stream, IL 60197-4350

Zarzaur & Schwartz, P.C. P.O. Box 11366 Birmingham, AL 35202