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

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

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.

rt 1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on your government-issued picture identification (for	Tina First name		First name
example, your driver's license or passport).	Marie Middle name	_	Middle name
Bring your picture identification to your meeting with the trustee.	Fazio Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	,		
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4684		
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Fazio Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Tina First name Marie Middle name Fazio Last name and Suffix (Sr., Jr., II, III) XXX-XX-4684

		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)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		11826 Military Road South Seattle, WA 98168-1232	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		King	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
this district to file for bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	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.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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

No. Go to line 12.

bankruptcy petition.

eb	tor 1 Tina Marie Fazio			Case number (if known)
r	3: Report About Any Bu	sinassas	Vou Own as a	a Sola Proprietor
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part	
	business:	☐ Yes.	Name and	location of business
	A sole proprietorship is a	— 100.		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			usiness, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, S	treet, City, State & ZIP Code
	it to this petition.		Check the	appropriate box to describe your business:
			☐ Hea	alth Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Sin	gle Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Sto	ockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Cor	mmodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ Nor	ne of the above
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicat ns, cash-flow st S.C. 1116(1)(B)	chapter 11, the court must know whether you are a small business debtor so that it can set appropriate that you are a small business debtor, you must attach your most recent balance sheet, statement contatement, and federal income tax return or if any of these documents do not exist, follow the procedure. In the court must know whether you are a small business debtor so that it can set appropriate that you must be a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor.
	For a definition of small	■ No.	i am not illi	ing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing ι Code.	under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing ι	under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod
ır	Report if You Own or	Have Any	/ Hazardous P	Property or Any Property That Needs Immediate Attention
	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 ha	azard?
	public health or safety? Or do you own any		If immediate a	attention is
	property that needs immediate attention?		needed, why	
	property that needs			is it needed?
	property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed,		needed, why	is it needed?

Debtor 1 Tina Marie Fazio

Case number (if known)

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.

Official Form 101

Debt	or 1 Tina Marie Fazio			C	ase number (if known)		
Part	6: Answer These Quest	ions for R	eporting Purposes				
	What kind of debts do you have?	16a.		nsumer debts? Consumer debonal, family, or household purpo		J.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		siness debts? Business debts stment or through the operation			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ov	we that are not consumer debts	or business debts		
	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.		to you estimate that after any example to distribute to unsecure		uded and administrative expenses	
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	□ 50	5,001-50,000 0,001-100,000 lore than100,000	
	How much do you estimate your assets to be worth?	□ \$100,	550,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 milli □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 n □ \$100,000,001 - \$500	illion	500,000,001 - \$1 billion 1,000,000,001 - \$10 billion 10,000,000,001 - \$50 billion ore than \$50 billion	
	How much do you estimate your liabilities to be?	□ \$100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 milli □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 n □ \$100,000,001 - \$500	illion	500,000,001 - \$1 billion 1,000,000,001 - \$10 billion 10,000,000,001 - \$50 billion fore than \$50 billion	
Part	7: Sign Below						
or y	ou	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			chosen to file under Chapter 7, tates Code. I understand the re				
			rney represents me and I did n nt, I have obtained and read the	1 , 0 , ,		ey to help me fill out this	
		I request	relief in accordance with the cl	hapter of title 11, United States	Code, specified in this	s petition.	
		bankrupt and 357				by fraud in connection with a thh. 18 U.S.C. §§ 152, 1341, 1519,	
		Tina Ma	e of Debtor 1	Signatu	re of Debtor 2		
		Executed	d on February 11, 2017 MM / DD / YYYY	Execute	ed on MM / DD / YYY	YY	

page 6

Debtor 1	Tina Marie Fazio	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/ Jan Go Signature of	ssing Attorney for Debtor	Date	February 11, 2017 MM / DD / YYYY	
Jan Gossi	ng			
GHG Law	Group PLLC			
Firm name 31811 Pac	ific Highway South			
B101 Federal W	ay, WA 98003			
Number, Street,	City, State & ZIP Code			
Contact phone 31559	2067294777	Email address	jan@ghglegal.com	
Bar number & S	tate			

Filli	n this inform	ation to identify your	case:			
Deb		Tina Marie Fazio				
Deb	tor 2	First Name	Middle Name	Last Name		
	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Banl	kruptcy Court for the:	WESTERN DISTRICT C	F WASHINGTON		
1	e number					
(if kno	own)				_	if this is an led filing
					umon	ica ming
Off	icial For	m 106Sum				
			and Liabilities an	d Certain Statistical Information	1	2/15
infor	mation. Fill or original form	ut all of your schedule	es first; then complete th	are filing together, both are equally responsible information on this form. If you are filing ament the box at the top of this page.		
					Your as	ssets f what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo 55, Total real estate, fr	orm 106A/B) om Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B		. \$	2,600.00
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	2,600.00
Part	2: Summa	rize Your Liabilities				
						abilities you owe
2.			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i> .	\$	0.00
3.	Schedule E/F 3a. Copy the	E: Creditors Who Have total claims from Part	Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	. \$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	. \$	23,498.00
				Your total liabilitie	as ¢	23,498.00
				rour total habilitie	ε5 φ	23,496.00
Part	3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		I	\$	500.00
5.		Your Expenses (Official onthly expenses from line			\$	410.00
Part	4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	•		er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court with	your other sch	edules.
7.	YesWhat kind of	debt do you have?				
				lebts are those "incurred by an individual primarily fig for statistical purposes. 28 U.S.C. § 159.	or a personal,	family, or

Official Form 106Sum S

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

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.

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

\$_____

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

	Total clair	m
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.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	7,204.00
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.	\$	7,204.00

Debtor 1	Tina Marie Fazio	
Dahtar 0	First Name Middle Name Last Name	
Debtor 2 Spouse, if filing)	First Name Middle Name Last Name	
Jnited States Ba	Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON	
Case number		☐ Check if this is ar
		amended filing
Official Fo	orm 106A/B	
	le A/B: Property	12/15
	, separately list and describe items. List an asset only once. If an asset fits in more th	
	Be as complete and accurate as possible. If two married people are filing together, boore space is needed, attach a separate sheet to this form. On the top of any additional estion.	
Part 1: Describe	e Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest	In
. Do you own or	r have any legal or equitable interest in any residence, building, land, or similar prope	rty?
No. Go to Pa	art 2.	
□ Vas Whara		
☐ Yes. Where	e is the property?	
Part 2: Describe	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and	
Part 2: Describe Do you own, lea omeone else dr	ne Your Vehicles ase, or have legal or equitable interest in any vehicles, whether they are reg	
Part 2: Describe Do you own, lea comeone else dr Cars, vans, to No Yes	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and	nd Unexpired Leases.
Part 2: Describe Do you own, lead one one else dr B. Cars, vans, to No Yes Part 2: Describe	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles	nd Unexpired Leases.
Part 2: Describe Do you own, lead one one else dr B. Cars, vans, to No Yes Describe No Xers, vans, to Rescribe No Xers, vans, to	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles	nd Unexpired Leases.
Part 2: Describe Do you own, lead one one else dr B. Cars, vans, to No Yes Watercraft, a Examples: Boo	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles	nd Unexpired Leases.
Part 2: Describe Do you own, lead omeone else dr Cars, vans, tr No Yes Watercraft, a Examples: Box No Yes Add the doll	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles	and accessories cle accessories g any entries for
Part 2: Describe Do you own, lea omeone else dr Cars, vans, tr No Yes Watercraft, a Examples: Box No Yes Add the doll pages you h	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycles	and accessories cle accessories g any entries for
Part 2: Describe Do you own, lead omeone else dro Cars, vans, to No Yes Watercraft, a Examples: Boo No Yes Add the doll pages you here.	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycles llar value of the portion you own for all of your entries from Part 2, including have attached for Part 2. Write that number here	and accessories cle accessories g any entries for
Part 2: Describe Do you own, lead omeone else dra S. Cars, vans, tra No Yes No Yes No Yes Add the doll pages you he pages you he pages you he pages you own or Household gramples: Mo No No	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycles allar value of the portion you own for all of your entries from Part 2, including have attached for Part 2. Write that number here	g any entries for \$0.00 Current value of the portion you own? Do not deduct secured
Part 2: Describe Do you own, lead omeone else drawners. Cars, vans, to watercraft, a Examples: Boo watercraft and Examples: Boo watercraft and Examples: Boo watercraft and watercraft and watercraft and Examples: Boo watercraft and watercraft and Examples: Boo watercraft and watercraft and Examples: Boo watercraft and wa	ase, or have legal or equitable interest in any vehicles, whether they are regrives. If you lease a vehicle, also report it on Schedule G: Executory Contracts at trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycles allar value of the portion you own for all of your entries from Part 2, including have attached for Part 2. Write that number here	g any entries for \$0.00 Current value of the portion you own? Do not deduct secured

■ No

☐ Yes. Describe.....

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

page 1

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De	ebtor 1	Tina Marie Fa	zio Case number (if known)	
3.			gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, ns, memorabilia, collectibles	or baseball card collections;
	■ No			
	☐ Yes.	Describe		
	Example _	ent for sports and es: Sports, photog musical instrur	raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	Firearm Examp		shotguns, ammunition, and related equipment	
		Describe		
11.	Clothes Examp		hes, furs, leather coats, designer wear, shoes, accessories	
		Describe		
			Clothes / Wearing Apparel	\$400.00
	□ No	bles: Everyday jew	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, ç	
			Jewelry	\$200.00
	Examp ■ No □ Yes.	rm animals bles: Dogs, cats, bi Describe her personal and	rds, horses household items you did not already list, including any health aids you did not list	
	☐ Yes.	Give specific info	mation	
15			f all of your entries from Part 3, including any entries for pages you have attached umber here	\$1,600.00
Pa	rt 4: Des	scribe Your Financi	al Assets	
Do	you ow	vn or have any leg	gal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		ave in your wallet, in your home, in a safe deposit box, and on hand when you file your petiti	on
17.	Deposi	its of money oles: Checking, sav	vings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage I you have multiple accounts with the same institution, list each.	nouses, and other similar
	■ No		, , , , , , , , , , , , , , , , , , , ,	
	☐ Yes		Institution name:	

Official Form 106A/B Schedule A/B: Property page 2

De	ebtor 1	Tina Marie Fazio		Case number (if known)	
18.		, mutual funds, or publicly trac ples: Bond funds, investment acc	led stocks counts with brokerage firms, mone	y market accounts	
	■ No		•	•	
	☐ Yes	Institu	tion or issuer name:		
19.		ublicly traded stock and intere renture	sts in incorporated and unincor	porated businesses, including an interest in a	an LLC, partnership, and
	■ No				
	☐ Yes.	Give specific information about Name of e		% of ownership:	
20.	Negoti	iable instruments include person	d other negotiable and non-neg al checks, cashiers' checks, prom you cannot transfer to someone by	ssory notes, and money orders.	
	_	Circa and aifin information about	h		
	⊔ Yes.	Give specific information about lissuer national			
21.		ment or pension accounts ples: Interests in IRA, ERISA, Ke	ogh, 401(k), 403(b), thrift savings	accounts, or other pension or profit-sharing plans	3
		List such associations apparetally			
	□ res.	List each account separately. Type of accounts	ount: Institution na	me:	
22.	Your s		, ,	nue service or use from a company ric, gas, water), telecommunications companies,	or others
	■ No				
	☐ Yes.		Institution na	me or individual:	
23.	Annuit	ies (A contract for a periodic pay	ment of money to you, either for I	fe or for a number of years)	
	Yes	Issuer name and	description.		
24.	26 U.S.	ts in an education IRA, in an a C. §§ 530(b)(1), 529A(b), and 52		ram, or under a qualified state tuition prograr	n.
	■ No □ Yes	Institution name a	and description. Separately file the	records of any interests.11 U.S.C. § 521(c):	
25.	Trusts,	, equitable or future interests i	n property (other than anything	listed in line 1), and rights or powers exercise	able for your benefit
		Give specific information about	them		
26.			le secrets, and other intellectua osites, proceeds from royalties an		
	■ No				
	☐ Yes.	Give specific information about	them		
27.	Examp	es, franchises, and other general bles: Building permits, exclusive		holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about	them		
M	oney or	property owed to you?			Current value of the
		,			portion you own? Do not deduct secured claims or exemptions.

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

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years Tax Refund Federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security Settlement on the property sett	
Tax Refund Federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Secubenefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Secular benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Secular benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
 Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Secubenefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or 	\$1,000.00
30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Securbenefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
 Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Seculo benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or 	
31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	rity
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or	
	refund
 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property becausomeone has died. No Yes. Give specific information 	6 e
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment <i>Examples:</i> Accidents, employment disputes, insurance claims, or rights to sue	
■ No □ Yes. Describe each claim	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
■ No □ Yes. Describe each claim	
35. Any financial assets you did not already list	
■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	00.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	
☐ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7.	

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

Debt	or 1 Tina Marie Fazio		Case number (if known)	
[☐ Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form		·	
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$1,600.00		
58.	Part 4: Total financial assets, line 36	\$1,000.00		
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	\$2,600.00	Copy personal property total	\$2,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$2,600,00

Fil	l in this informa	ation to identify your o	case:				
De	btor 1	Tina Marie Fazio	Middle Name	Last Name			
De	btor 2	i iist ivaille	Middle Name	Last Ivallie			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Banl	kruptcy Court for the:	WESTERN DISTRICT OF V	VASHINGTON			
	nown)				☐ Check if this is an amended filing		
Of	fficial For	m 106C					
			perty You Cla	aim as Exempt	4/16		
the nee cas	property you list ded, fill out and e number (if kno each item of p	ted on Schedule A/B: Po attach to this page as nown). roperty you claim as e	roperty (Official Form 106A/B) many copies of Part 2: Addition exempt, you must specify the) as your source, list the property that youngle Page as necessary. On the top of a need amount of the exemption you clair	ny additional pages, write your name and n. One way of doing so is to state a		
any fun exe	applicable sta ds—may be un emption to a pa	tutory limit. Some exe limited in dollar amou	mptions—such as those fo int. However, if you claim ar	n exemption of 100% of fair market va	benefits, and tax-exempt retirement		
Pa	rt 1: Identify	the Property You Clai	im as Exempt				
1.	Which set of e	exemptions are you cla	aiming? Check one only, eve	en if your spouse is filing with you.			
	☐ You are clai	ming state and federal	nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)			
	You are clai	ming federal exemption	ns. 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		on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Check only one box for each exemption.			
	Household C	Goods and Furnishi	ngs \$1,000.00	\$1,000.00	11 U.S.C. § 522(d)(3)		
	Line nom Sche	eaule A/B. V. I		100% of fair market value, up to any applicable statutory limit	-		
	Clothes / We	earing Apparel	\$400.00	\$400.00	11 U.S.C. § 522(d)(3)		
	Line nom Sche	edule A/D. IIII		100% of fair market value, up to any applicable statutory limit)		
	Jewelry Line from Sche	odulo A/P: 12 1	\$200.00	\$200.00	11 U.S.C. § 522(d)(4)		
	Line nom och	squie A/B. 12.1		☐ 100% of fair market value, up to any applicable statutory limit			
	Federal: Tax Refund Line from Schedule A/B: 28.1		\$1,000.00	\$1,000.00	11 U.S.C. § 522(d)(5)		
	Line nom Sche	edule PAB. 20. i		100% of fair market value, up to any applicable statutory limit	-		
3.	(Subject to adjust No	ustment on 4/01/19 and	, ,	75? ases filed on or after the date of adjustn rithin 1,215 days before you filed this ca	,		

Official Form 106C Schedule C: The Property You Claim as Exempt

page 1 of 2

☐ Yes

Fill in this information to identify your case:							
Debtor 1	Tina Marie Fazio						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF WASHINGTON				
Case number							
(if known)					Check if this is an		
					amended filing		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

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

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in this info	ormation to identify your	ase:		
Debtor 1	Tina Marie Fazio			
	First Name	Middle Name L	_ast Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name L	_ast Name	_
	Bankruptcy Court for the:	WESTERN DISTRICT OF WASH		
				_
Case number (if known)				☐ Check if this is an amended filing
Official Fo	rm 106F/F			
		ho Have Unsecured C	laims	12/15
Schedule D: Cred left. Attach the C name and case n	ditors Who Have Claims Sec	e. If you have no information to report	eded, copy the Part you need, fill it	ially secured claims that are listed in out, number the entries in the boxes on the the top of any additional pages, write your
	litors have priority unsecure			
No. Go to		r ciaims agamst you:		
☐ Yes.) Fail 2.			
	All of Your NONPRIORIT	Y Unsecured Claims		
	litors have nonpriority unsec			
_ `		art. Submit this form to the court with you	ir other schedules	
Yes.	lave nothing to report in this p	int. Submit this form to the court with you	other sorteduces.	
unsecured cl	laim, list the creditor separately		entify what type of claim it is. Do not	creditor has more than one nonpriority list claims already included in Part 1. If more ured claims fill out the Continuation Page of
r uit 2.				Total claim
4.1 Allian	ce One	Last 4 digits of accoun	nt number 9896	\$267.00
	rity Creditor's Name	When wee the debt in		
	ox 2449 arbor, WA 98335	When was the debt inc	;urrea?	
	Street City State Zlp Code	As of the date you file,	, the claim is: Check all that apply	
Who in	curred the debt? Check one.			
Deb	tor 1 only	☐ Contingent		
☐ Debi	tor 2 only	☐ Unliquidated		
☐ Debi	tor 1 and Debtor 2 only	☐ Disputed		
☐ At le	ast one of the debtors and and		unsecured claim:	
☐ Che debt	ck if this claim is for a comr		uit of a congration agreement as allow	troe that you did not
	laim subject to offset?	Doligations arising o report as priority claims	out of a separation agreement or divo	rice mai you did not
■ No			profit-sharing plans, and other simila	r debts
□ Yes		Other Specify Kir	m Okamura DDS	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 13

or 1 Tina Marie Fazio		Case number (if know)				
Comenity Bank/Inbryant Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00			
4590 E Broad St Columbus, OH 43213	When was the debt incurred?	Opened 8/20/11 Last Active 9/02/15				
Number Street City State Zlp 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☐ Disputed					
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecure Student loans	d claim:				
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	Other. Specify Charge Ac	count				
Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	2247	\$0.00			
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/08 Last Active 7/16/15				
Number Street City State Zlp 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 debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not				
No	☐ Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Credit Card					
Creditonebnk	Last 4 digits of account number	7689	\$0.0			
Nonpriority Creditor's Name Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 12/15/08 Last Active 12/06/10				
Number Street City State Zlp 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	d claim:					
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	an plane and other similar data-				
■ No		= :				
Yes	Other. Specify Credit Card	<u> </u>				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 13

Best Case Bankruptcy

Debtor	1 Tina Marie Fazio		Case number (if know)	
1.5	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	5869	\$1,247.00
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 07/13 Last Active 7/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
6	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	7968	\$492.00
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 10/14 Last Active 7/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
	LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	0666	\$540.00
	PO Box 10497	When was the debt incurred?	Opened 07/16	
	Greenville, SC 29603 Number Street City State Zlp Code	 As of the date you file, the claim i	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	s. Спеск ан так арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	d claim:		
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collecting	for Webbank Gettington	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 13

Debte	or 1 Tina Marie Fazio	Case number (if know)				
4.8	Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number	6309	\$2,178.00		
	2365 Northside Drive Ste 30 San Diego, CA 92108	When was the debt incurred?	Opened 02/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Collecting 1	or Credit One Bank N.A.			
4.9	Onemain Fi	Last 4 digits of account number	9143	\$0.00		
	Nonpriority Creditor's Name		Opened 04/15 Last Active			
	6801 Colwell Blvd Irving, TX 75039	When was the debt incurred?	12/29/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Unsecured				
4.1	Onemain Financial	Last 4 digits of account number	3120	\$5,752.00		
	Nonpriority Creditor's Name	_				
	Po Box 1010 Evansville, IN 47706	When was the debt incurred?	Opened 03/15 Last Active 6/03/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ 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	g plans, and other similar debts			
	Yes	■ Other. Specify Note Loan				

Schedule E/F: Creditors Who Have Unsecured Claims

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Pugt Snd Col	Last 4 digits of account number 1406	\$215.00
Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	
Number Street City State Zlp 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 Multicare Health System	
Pugt Snd Col	Last 4 digits of account number 9915	\$97.00
Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	
Number Street City State Zlp 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	
\square 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 Multicare Medical Associates	
Pugt Snd Col	Last 4 digits of account number 8948	\$95.00
Nonpriority Creditor's Name Pob 66995	When was the debt incurred?	·
Tacoma, WA 98464 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date you me, the stant lot offers 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?	Dobligations 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 Multicare Medical Associates	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 13

Pugt Snd Col	Last 4 digits of account number 1214	\$95.0
Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	
Number Street City State Zlp 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	
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 Multicare Medical Associates	
Pugt Snd Col	Last 4 digits of account number 4774	\$95.0
Nonpriority Creditor's Name Pob 66995	When was the debt incurred?	
Tacoma, WA 98464 Number Street City State Zlp 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?	Dobligations 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 Multicare Medical Associates	
Pugt Snd Col	Last 4 digits of account number 7255	\$95.0
Nonpriority Creditor's Name	Last 4 digits of account fidnises	400.
Pob 66995	When was the debt incurred?	
Tacoma, WA 98464 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.00. and date you me, and date in the case of an indicapply	
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:	
\square 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	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
— INO	200.0 to portion of profit offaring plane, and other offinial debte	

Schedule E/F: Creditors Who Have Unsecured Claims

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Deb	or 1 Tina Marie Fazio	Case number (if know)	
4.1 7	Pugt Snd Col	Last 4 digits of account number 1936	\$95.00
<u>. </u>	Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	
	Number Street City State Zlp 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 Multicare Medical Associates	
4.1 8	Pugt Snd Col	Last 4 digits of account number 1938	\$95.00
	Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	
	Number Street City State Zlp 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	
	\square 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 Multicare Medical Associates	
4.1 9	Pugt Snd Col	Last 4 digits of account number 1347	\$85.00
9	Nonpriority Creditor's Name		******
	Pob 66995	When was the debt incurred?	
	Tacoma, WA 98464 Number Street City State Zlp 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. Oneok an 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 Multicare Health System	
	. 00	— Outer. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

¹ Tina Marie Fazio		Case number (if know)	
Pugt Snd Col	Last 4 digits of account number	1934	\$51.0
Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?		
Number Street City State Zlp 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 unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Multicare N	Medical Associates	
Pugt Snd Col	Last 4 digits of account number	9254	\$0.0
Nonpriority Creditor's Name Pob 66995 Tacoma, WA 98464	When was the debt incurred?	Last Active 7/27/11	
Number Street City State Zlp 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		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Multicare N		
Sears/cbna	Last 4 digits of account number	2264	\$28.0
Nonpriority Creditor's Name			
Po Box 6282 Sioux Falls, SD 57117	When was the debt incurred?	Opened 02/13 Last Active 1/07/17	
Number Street City State Zlp 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 unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No No	Debts to pension or profit-sharin		
Yes	Other. Specify Credit Card	d	

Schedule E/F: Creditors Who Have Unsecured Claims

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¹ Tina Marie Fazio		Case number (if know)	
Seventh Avenue	Last 4 digits of account number	657O	\$291.0
Nonpriority Creditor's Name	_	Opened 01/14 Last Active	
1112 7th Ave Monroe, WI 53566	When was the debt incurred?	2/20/16	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Syncb/care Credit	Last 4 digits of account number	3303	\$0.0
Nonpriority Creditor's Name			70.0
950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 10/13 Last Active 9/01/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc		
0 1/15 1 7		0070	
Syncb/discount Tire Nonpriority Creditor's Name	Last 4 digits of account number	9370	\$0.0
C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 2/20/15 Last Active 4/30/15	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,,,,,,	or onest an inat apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

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¹ Tina Marie Fazio		Case number (if know)	
Syncb/old Navy	Last 4 digits of account number	0333	\$348.0
Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 09/13 Last Active 10/16/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Syncb/walmart	Last 4 digits of account number	0076	\$1,143.0
Nonpriority Creditor's Name Po Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 10/14 Last Active 12/25/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Toyota Mtr	Last 4 digits of account number	0001	\$0.0
Nonpriority Creditor's Name 3006 Northup Way Ste 300 Bellevue, WA 98004	When was the debt incurred?	Opened 1/22/09 Last Active 5/21/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify Automobile	•	

Schedule E/F: Creditors Who Have Unsecured Claims

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or 1	Tina Marie Fazio		Case number (if know)					
U	nifund Ccr Llc	Last 4 digits of account number	8795	\$478.00				
1	onpriority Creditor's Name 0625 Techwoods Circle	When was the debt incurred?	Opened 06/16					
	incinnati, OH 45242 umber Street City State Zlp Code	As of the date you file, the claim i	in Chack all that apply					
	In o incurred the debt? Check one.	As of the date you me, the claim i	в. Спеск ан тыт арру					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
_	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community	☐ Student loans						
de	ebt the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts					
] Yes	Other. Specify Factoring C	Company Account Webbank					
U	s Bk Rms Cc	Last 4 digits of account number	1257	\$2,512.0				
N	onpriority Creditor's Name	<u>-</u>						
	o Box 108 aint Louis, MO 63166	When was the debt incurred?	Opened 01/15 Last Active 11/06/15					
	umber Street City State Zlp Code	As of the date you file, the claim i						
W	ho incurred the debt? Check one.							
	Debtor 1 only							
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and another	d claim:						
	Check if this claim is for a community	☐ Student loans						
	ebt the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	No	Debts to pension or profit-sharin	ng plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
	s Dept Of Ed/gleIsi onpriority Creditor's Name	Last 4 digits of account number	8581	\$7,204.0				
Р	o Box 7860 ladison, WI 53707	When was the debt incurred?	Opened 03/16 Last Active 12/31/16					
N	umber Street City State Zlp Code (ho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
_	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
		Type of NONPRIORITY unsecured	d claim:					
	At least one of the debtors and another							
	Check if this claim is for a community	Student loans						
C de			aration agreement or divorce that you did not					
□ de Is	Check if this claim is for a community	☐ Obligations arising out of a sepa						

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

tor 1 Tina	a Marie	e Fazio		Case r	number (if know)	
		ngerhut itor's Name	Last 4 digits of account number	8795		\$0.0
		vood Road , MN 56303	When was the debt incurred?	Oper 11/17	ned 09/14 Last Active 7/15	
		City State Zlp Code he debt? Check one.	As of the date you file, the claim i	is: Checl	k all that apply	
_			П			
	tor 1 only		Contingent			
	tor 2 only		☐ Unliquidated			
_		Debtor 2 only	☐ Disputed			
		of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
☐ Che debt	ck if this	claim is for a community	_			
	laim sul	ject to offset?	■ Obligations arising out of a sepa report as priority claims	iration ag	greement or divorce that you did not	
■ No		•	Debts to pension or profit-sharin	a plans.	and other similar debts	
☐ Yes			■ Other. Specify Charge Acc			
<u>□ 162</u>			Other. Specify Charge Act	Journ		
		ettington itor's Name	Last 4 digits of account number	0666	·	\$0.0
6250 I	Ridgev	vood Road , MN 56303	When was the debt incurred?	Opened When was the debt incurred? 12/06/15		
Number	r Street C	City State Zlp Code the debt? Check one.	As of the date you file, the claim i	i s: Checl	k all that apply	
■ Debt	tor 1 only	l	☐ Contingent			
☐ Deb	tor 2 only	1	☐ Unliquidated			
		Debtor 2 only	☐ Disputed			
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
		s claim is for a community	☐ Student loans			
debt		oject to offset?	Obligations arising out of a separeport as priority claims	ration ag	greement or divorce that you did not	
■ No			Debts to pension or profit-sharing	g plans,	and other similar debts	
☐ Yes			Other. Specify Charge Acc	count		
3: List	Others	to Be Notified About a Deb	t That You Already Listed			
rying to col ve more tha tified for an	llect from an one carry ay debts	n you for a debt you owe to son	neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page.	Parts 1	ndy listed in Parts 1 or 2. For example, if a or 2, then list the collection agency here. reditors here. If you do not have additiona	Similarly, if you
tal the amo			ns. This information is for statistical re	eporting	purposes only. 28 U.S.C. §159. Add the a	ımounts for eac
e of unsecu	ured cla	im.				
	^	Demostic and a state of			Total Claim	
Total	6a.	Domestic support obligations		6a.	\$	
claims						
n Part 1	6b.	Taxes and certain other debts	,	6b.	\$ 0.00	
	6c.		njury while you were intoxicated	6c.	\$ 0.00	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$ 0.00	
	6e.	Total Priority. Add lines 6a throu	ugh 6d.	6e.	\$ 0.00	
					Total Claim	
-	6f.	Student loans		6f.	\$ 7,204.00	
Total claims n Part 2	6g.	Obligations arising out of a se	paration agreement or divorce that			
	og.	you did not report as priority of		6g.	\$ 0.00	

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Official Form 106 E/F

Best Case Bankruptcy

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Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Tina Marie Fazio

Case number (if know)

- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6h. \$ 0.00 6i. \$ 16,294.00
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here
- 6j. \$ **23,498.00**

6j. Total Nonpriority. Add lines 6f through 6i.

Fill in this infor	rmation to identify your	case:			
Debtor 1	Tina Marie Fazio				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT (OF WASHINGTON		
Case number					
(if known)				☐ Check if t amended	

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).

- 1. 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.
 - Tyes. 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	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
					_
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olalo	211 0000	
	Name				
	Number	Street			_
					_
	City		State	ZIP Code	
2.4					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	Oity		State	ZIF COUE	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	s information to identify yo	ur case:			
Debtor 1	Tina Marie Faz				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	e: WESTERN DISTRICT	OF WASHINGTON		
Case num (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Co	debtors			12/15
fill it out, a		he boxes on the left. Attac vn). Answer every questio	th the Additional Page to n.	o this page. On the top of	led, copy the Additional Page, any Additional Pages, write
■ No					
Arizo	thin the last 8 years, have yna, California, Idaho, Louisia				ates and territories include
	s. Did your spouse, former s	pouse, or legal equivalent liv	ve with you at the time?		
in lin Form	e 2 again as a codebtor on	ly if that person is a guara	ntor or cosigner. Make	sure you have listed the c	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State ar	d ZIP Code		Column 2: The credite Check all schedules the	or to whom you owe the debt nat apply:
3.1	Name			_ ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Name			☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐	
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

	in this information to	o identify your ca Tina Marie F									
Del	otor 2 buse, if filing)	Tilla Marie I	a210			_					
		tcy Court for the	: WESTERN DISTRICT	OF WASHINGTON							
(If kr	se number hown) fficial Form	1061				_	□ A □ A 1		ed filing ent showing as of the fo	g postpetition llowing date:	chapter
	chedule I:		ome				IV	IIVI / DD/ I			12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	ormation. If you parated and you et to this form.	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	g jointly, and your th you, do not inclu onal pages, write yo	spouse i de infori	s liv natio	ing with on about	you, incl your spoumber (if	ude inform buse. If mo known). A	nation about ore space is i nswer every	your needed,
	information.			Debtor 1				_		ing spouse	
	If you have more attach a separate information about employers.	page with	Employment status Occupation	☐ Employed ■ Not employed				☐ Emple	•		
	Include part-time, self-employed wo		Employer's name								
	Occupation may i or homemaker, if		Employer's address								
			How long employed to	nere?				_			
Par	t 2: Give De	tails About Mor	thly Income								
	mate monthly incouse unless you are		ate you file this form. If	you have nothing to r	eport for	any l	ine, write	\$0 in the	space. Inc	lude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	mbine the informatio	n for all e	emplo	oyers for	that perso	on on the lir	nes below. If y	you need
							For Del	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$		0.00	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

13. Do you expect an increase or decrease within the year after you file this form?

applies

Yes. Explain:

500.00

12.

Combined monthly income

			Ī		
FIII	in this information to identify your case:				
Deb	otor 1 Tina Marie Fazio		Chec	k if this is:	
		_	_	An amended filing	
!	otor 2ouse, if filing)			A supplement show 13 expenses as of t	ving postpetition chapter
(Spt	ouse, it ming)			13 expenses as on	the following date.
Unit	ted States Bankruptcy Court for the: WESTERN DISTRICT OF WASH	HINGTON	1	MM / DD / YYYY	
l	se number				
(If k	rnown)				
O	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
	rt 1: Describe Your Household				
1.	Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
J.	expenses of people other than yourself and your dependents?				
Dar	rt 2: Estimate Your Ongoing Monthly Expenses				
Est exp	timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	clude expenses paid for with non-cash government assistance a value of such assistance and have included it on <i>Schedule I:</i> Ifficial Form 106I.)			Your expe	enses
,51					
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	e 4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	5. \$		0.00

eptor 1 _	Ina Marie Fazio	Case num	iber (if known)	
Utilitie	e·			
	Electricity, heat, natural gas	6a.	\$	0.00
	Nater, sewer, garbage collection	6b.	·	0.00
	Felephone, cell phone, Internet, satellite, and cable services	6c.	· : ———	0.00
	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	— 7.	·	250.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	·	50.00
	nal care products and services	10.	·	25.00
	al and dental expenses	11.	· : ———	10.00
	portation. Include gas, maintenance, bus or train fare.	11.	Ψ	10.00
	include car payments.	12.	\$	50.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
	able contributions and religious donations	14.	·	0.00
Insura	•		<u> </u>	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
15c. '	/ehicle insurance	15c.	\$	0.00
	Other insurance. Specify:	15d.	· -	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Specify	· · · · ·	16.	\$	0.00
	ment or lease payments:		<u> </u>	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
17b. (Car payments for Vehicle 2	17b.	\$	0.00
17c. (Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report as			
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other	payments you make to support others who do not live with you.		\$	0.00
Specify	r.	19.		
	real property expenses not included in lines 4 or 5 of this form or on Sche			
20a. I	Mortgages on other property	20a.	·	0.00
20b. I	Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. I	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. I	Homeowner's association or condominium dues	20e.	\$	0.00
Other:	Specify:	21.	+\$	0.00
	ate your monthly expenses			
	dd lines 4 through 21.		\$	410.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	410.00
Calcul	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	500.00
	Copy your monthly expenses from line 22c above.	23b.		410.00
23c.	Subtract your monthly expenses from your monthly income.			00.00
	The result is your monthly net income.	23c.	\$	90.00
For exa modifica	u expect an increase or decrease in your expenses within the year after you mple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?			e or decrease because o
■ No.				

Fill in this in	formation to identify your	case:				
Debtor 1	Tina Marie Fazio					
	First Name	Middle Name	Last Name	_		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	WESTERN DISTRIC	CT OF WASHINGTON			
Case numbe (if known)	г				☐ Check if thi amended fi	
	orm 106Dec ation About a	an Individu	al Debtor's	Schedules		12/15
If two marrie	d people are filing togethe	r, both are equally res	sponsible for supplying	correct information.		
obtaining mo	e this form whenever you f oney or property by fraud i h. 18 U.S.C. §§ 152, 1341,	n connection with a b				
	Sign Below					
Did you	ı pay or agree to pay some	one who is NOT an a	ttorney to help you fill o	out bankruptcy forms?		
■ No						
☐ Ye	es. Name of person				kruptcy Petition Prepar n, and Signature (Officia	,
	enalty of perjury, I declare y are true and correct.	that I have read the s	summary and schedules	filed with this declaration	on and	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Signature of Debtor 2

Date ___

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X /s/ Tina Marie Fazio

Tina Marie FazioSignature of Debtor 1

Date **February 11, 2017**

Best Case Bankruptcy

Fill	l in th	nis information to identify y	our case:			
De	btor 1	Tina Marie Fa	zio			
	h (6	First Name	Middle Name	Last Name		
1	btor 2 buse if,		Middle Name	Last Name		
Un	ited S	States Bankruptcy Court for the	ne: WESTERN DISTRICT	OF WASHINGTON		
1	se nu nown)	ımber				Check if this is an amended filing
St	ate	mplete and accurate as po	ssible. If two married people	iduals Filing for E e are filing together, both are to this form. On the top of ar	e equally responsible for so	
		(if known). Answer every q			, audinoma, pagos, mino ,	
Pa	rt 1:	Give Details About Your	Marital Status and Where Y	ou Lived Before		
1.	Wha	at is your current marital st	atus?			
		Married Not married				
2.	Dur	ing the last 3 years, have y	ou lived anywhere other tha	n where you live now?		
		No				
		Yes. List all of the places ye	ou lived in the last 3 years. Do	not include where you live no	N.	
	De	btor 1 Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3. stat				egal equivalent in a commu Nevada, New Mexico, Puerto F		
		No Yes. Make sure you fill out	Schedule H: Your Codebtors (Official Form 106H).		
Pa	rt 2	Explain the Sources of Y	our Income			
4.	Fill i	in the total amount of income	you received from all jobs an	ting a business during this y d all businesses, including par eive together, list it only once u	t-time activities.	lendar years?
		No				
		Yes. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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5.	Include in and other	come regard public benef	lless of wheth fit payments;	er that inco pensions; i	ome is taxable. E rental income; in	Examples o terest; divid	dends; money colle	e alimony; child suppected from lawsuits; tonly once under De	royalties; and		
	List each	source and t	he gross inco	me from e	ach source sepa	rately. Do i	not include income	that you listed in lir	ne 4.		
	■ No										
	☐ Yes.	Fill in the de	tails.								
				Debtor 1				Debtor 2			
					of income	each (before	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deduction and exclusions)	ons
Pa	rt 3: Lis	t Certain Pa	yments You	Made Bef	ore You Filed fo	or Bankrup	otcy				
6.	□ No.	Neither Deindividual puring the No. Yes * Subject Debtor 1 c During the	90 days befor 3 go to line 7 List below et adjustment or Debtor 2 or 90 days befor 3 days befor 5 days befor 5 days befor 6 days befor 7 days befor 6 days befor 7 days befor 6 days befor 6 days befor 6 days befor 7 days befor 7 days befor 7 days befor 8 days befor 9 days befor	ebtor 2 ha personal, re you filed ach credite editor. Do re coayments on 4/01/19 r both have re you filed ach credite ach credite	family, or houseld for bankruptcy, or to whom you pnot include paym to an attorney fo and every 3 years are primarily cond for bankruptcy, or to whom you pdomestic supportuptcy case.	did you pa did you pa did a total dents for do r this bankr ars after th sumer del did you pa deaid a total t obligation	ots. Consumer delease." y any creditor a to of \$6,425* or more imestic support ob ruptcy case. at for cases filed o ots. y any creditor a to of \$600 or more a s, such as child su	tal of \$6,425* or more payligations, such as character the date of tal of \$600 or more?	re? ments and the support and	ne total amount yond alimony. Also,	ou do
	Creditor	's Name and	d Address		Dates of payr	nent	Total amount paid	Amount you still owe	was this p	payment for	
7.											
	Insider's	Name and	Address		Dates of payr	ment	Total amount	Amount you	Reason fo	r this payment	
3.	insider? Include pa	ayments on o		eed or cos	cy, did you mak		paid ments or transfer	still owe any property on a	ccount of a d	debt that benefite	∍d an
	Insider's	Name and	Address		Dates of payr	ment	Total amount	Amount you		r this payment	
							paid	still owe	include cre	ditor's name	

Case number (if known)

Official Form 107

Debtor 1 Tina Marie Fazio

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures			
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur- modifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		rty repossessed, foreclosed,	garnished, attached	I, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happened			property
11.	 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from y accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
Par		another official?			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any girts	s with a total value of more th	an \$600 per person	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		or contributions with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	,	contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or since you filed for b	ankruptcy, did you lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Describe any insurance co nclude the amount that insurance claims on line 33 c	ance has paid. List pending	Date of your loss	Value of property lost

Case number (if known)

Official Form 107 Statemen
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Debtor 1 Tina Marie Fazio

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?			ty to anyone you
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	GHG Law Group PLLC 31811 Pacific Highway South B101 Federal Way, WA 98003	\$1135 (\$1000 legal fees, \$100 f \$35 credit report)	iling fee,	various	\$1,135.00
 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No 					ty to anyone who
	Yes. Fill in the details. Person Who Was Paid Address	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 				
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred		any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		elf-settled tru	ist or similar device o	of which you are a
	Name of trust	Description and value of the prope	erty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposit Boxes, and Stor	age Units		

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage

houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Tina Marie Fazio Case number (if known)

21.	Do you now have, or dicash, or other valuables		before you filed for bankruptcy, a	ny safe deposit box or other deposito	ory for securities,
	■ No □ Yes. Fill in the deta	ails.			
	Name of Financial Inst Address (Number, Street, C		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 proper	ty in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the deta	ails.			
	Name of Storage Facili Address (Number, Street, C	•	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	rt 9: Identify Property	You Hold or Control for	Someone Else		
23.	Do you hold or control for someone.	any property that somed	one else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust
	■ No □ Yes. Fill in the det	ails.			
	Owner's Name Address (Number, Street, C	City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	rt 10: Give Details Abou	ut Environmental Informa	•		
	the purpose of Part 10, t				
	toxic substances, waste	es, or material into the a	ir, land, soil, surface water, ground	ning pollution, contamination, release lwater, or other medium, including st	
	Site means any location			aw, whether you now own, operate,	or utilize it or used
	Hazardous material me		mental law defines as a hazardous	waste, hazardous substance, toxic	substance,
Rep	oort all notices, releases,	and proceedings that yo	ou know about, regardless of wher	they occurred.	
24.	Has any governmental	unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the deta	ails.			
	Name of site Address (Number, Street, C	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 g	overnmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the deta	ails.			
	Name of site Address (Number, Street, C	City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Tina Marie Fazio		Case number (if known)		
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any env	ronmental law? Include settlements and orders.		
	_	No Yes. Fill in the details.				
		e Title	Court or agency	Nature of the case Status of the		
	Cas	e Number	Name Address (Number, Street, City, State and ZIP Code)	case		
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	With	n 4 years before you filed for bankrup	otcy, did you own a business or have ar	y 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	ip (LLP)		
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	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.			
		Yes. Check all that apply above and fi	Il in the details below for each busines	3.		
		iness Name ress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
		ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
	18041					
28.		n 2 years before you filed for bankrup utions, creditors, or other parties.	icy, did you give a financial statement	to anyone about your business? Include all financial		
	•	No				
	_	Yes. Fill in the details below.				
	Nan		Date Issued			
		ress ber, Street, City, State and ZIP Code)				
Pa	rt 12:	Sign Below				
l ha	ve rea	d the answers on this <i>Statement of Fi</i>	nancial Affairs and any attachments, a	nd I declare under penalty of perjury that the answers		
			a false statement, concealing property, \$250,000, or imprisonment for up to 20	or obtaining money or property by fraud in connection years, or both		
		§§ 152, 1341, 1519, and 3571.	ү,,	,,,		
		Marie Fazio				
		rie Fazio e of Debtor 1	Signature of Debtor 2			
		ebruary 11, 2017	Date			
			_			
Did ■ 1	-	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?		
_ ·						
Did	you p	ay or agree to pay someone who is no	ot an attorney to help you fill out bankro	iptcy forms?		
	No					
⊔`	res. N	ame of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declarati	on, and Signature (Official Form 119).		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ebtor 1	Tina Marie Fazio	0			
	First Name	Middle Name	Last Name		
ebtor 2 oouse if, filing)	First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court for the:	WESTERN DISTRI	CT OF WASHINGTON		
ase number known)					☐ Check if this is an
					amended filing
fficial Fo	orm 108				
tateme	nt of Intenti	on for Indivi	duals Filing Under C	hapter 7	7 12/15
				•	
	_	napter 7, you must fill o	out this form if:		
	e claims secured by y				
		and the lease has not			
			ou file your bankruptcy petition or by t time for cause. You must also send co		
on the		the court externes the	ame for dauge. For must also send do	pies to the ore	unoro una leccoro you no
vo married n	eonle are filing togeth	ner in a joint case, both	are equally responsible for supplying	correct inform	ation Roth debtors must
	nd date the form.	ier iir a joint oase, boti	are equally responsible for supplying		ation. Both debtors mast
ac complete					
as complete			anded ettech a concrete chect to this	form On the t	an of any additional name
			needed, attach a separate sheet to this	form. On the to	op of any additional pages
	and accurate as poss our name and case n		needed, attach a separate sheet to this	form. On the to	op of any additional page
write y		umber (if known).	eeded, attach a separate sheet to this	form. On the to	op of any additional page
write y	your name and case n	umber (if known).			
write y art 1: List Y For any credit nformation b	your name and case n Your Creditors Who Ha tors that you listed in selow.	umber (if known). ave Secured Claims Part 1 of Schedule D:	Creditors Who Have Claims Secured b	y Property (Off	icial Form 106D), fill in the
write y It 1: List Y For any credity Information b	our name and case n our Creditors Who Hators that you listed in	umber (if known). ave Secured Claims Part 1 of Schedule D:	Creditors Who Have Claims Secured b What do you intend to do with the pro	y Property (Off	icial Form 106D), fill in the
write y It 1: List Y For any credity Information b	your name and case n Your Creditors Who Ha tors that you listed in selow.	umber (if known). ave Secured Claims Part 1 of Schedule D:	Creditors Who Have Claims Secured b	y Property (Off	icial Form 106D), fill in the
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rt 1: List Y For any credit of formation be identify the creditor's name: Description of property	your name and case no your Creditors Who Hastors that you listed in selow.	umber (if known). ave Secured Claims Part 1 of Schedule D:	Creditors Who Have Claims Secured by What do you intend to do with the prosecures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	y Property (Off	icial Form 106D), fill in the Did you claim the prope as exempt on Schedule
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rt 1: List Y for any creditation by dentify the creditor's mame: Description of property securing debt Creditor's mame: Description of property Description of property Description of property	your name and case n Your Creditors Who Ha tors that you listed in selow. reditor and the property	umber (if known). ave Secured Claims Part 1 of Schedule D:	What do you intend to do with the prosecures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and redeem it.	y Property (Off	icial Form 106D), fill in the Did you claim the prope as exempt on Schedule No Yes
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Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor 1	Tina Marie Fazio	Case number (if know	vn)
name:		☐ Retain the property and redeem it.	□Yes
Descri	ption of	☐ Retain the property and enter into a Reaffirmation Agreement.	
proper	ty	☐ Retain the property and [explain]:	
securir	ng debt:		_
Part 2:	List Your Unexpired Personal Prope		
in the info	ormation below. Do not list real estat	at you listed in Schedule G: Executory Contracts and Unexpite leases. Unexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	he lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under pe	nalty of perjury, I declare that I have that is subject to an unexpired lease.	indicated my intention about any property of my estate that s	secures a debt and any personal
	Γina Marie Fazio	v	
	a Marie Fazio nature of Debtor 1	Signature of Debtor 2	
Date	February 11, 2017	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

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

\$550 administrative fee \$1,717 total fee

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.

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

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.

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

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/bankruptcv_fo

 $\frac{http://www.uscourts.gov/bkforms/bankruptcy_form}{s.html\#procedure.}$

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.

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

United States Bankruptcy Court Western District of Washington

In 1	re Tina Marie Fazio	tern District of Washingto	Case No				
111 1	IIIIa Marie Fazio	Debtor(s)	Chapter	7			
	DIGGLOGLIDE OF COMP		NEW EOD D	EDEOD (G)			
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR D	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, o	or agreed to be pai	d to me, for services			
	For legal services, I have agreed to accept		\$	1,000.00			
	Prior to the filing of this statement I have received	1	\$	1,000.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				law firm. A		
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy	case, including:			
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured control of the secured creditors of reaffirmation agreements and applications. 	atement of affairs and plan which a tors and confirmation hearing, and reduce to market value; exer- tions as needed; preparation a	may be required; d any adjourned he mption planning	earings thereof;	filing of		
б.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			ces, relief from sta	ay actions or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for p	payment to me for	representation of the	debtor(s) in		
	February 11, 2017	/s/ Jan Gossing					
	Date	Jan Gossing 3155 Signature of Attorney					
		GHG Law Group P					
		31811 Pacific High					
		B101 Federal Way, WA 9	วรกกร				
		2067294777 Fax:					
		jan@ghglegal.com					
		Name of law firm					

United States Bankruptcy Court Western District of Washington

In re	Tina Marie Fazio		Case No. Chapter				
		Debtor(s)		7			
	VERIFICATION OF CREDITOR MATRIX						
Γhe abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and cor	rect to the best	of his/her knowledge.			
Date:	February 11, 2017	/s/ Tina Marie Fazio					
		Tina Marie Fazio					

Signature of Debtor

ALLIANCE ONE PO BOX 2449 GIG HARBOR, WA 98335

COMENITY BANK/LNBRYANT 4590 E BROAD ST COLUMBUS, OH 43213

CREDIT ONE BANK NA PO BOX 98872 LAS VEGAS, NV 89193

CREDITONEBNK
PO BOX 98872
LAS VEGAS, NV 89193

FIRST PREMIER BANK 601 S MINNESOTA AVE SIOUX FALLS, SD 57104

LVNV FUNDING LLC PO BOX 10497 GREENVILLE, SC 29603

MIDLAND FUNDING 2365 NORTHSIDE DRIVE STE 30 SAN DIEGO, CA 92108

ONEMAIN FI 6801 COLWELL BLVD IRVING, TX 75039

ONEMAIN FINANCIAL PO BOX 1010 EVANSVILLE, IN 47706

PUGT SND COL POB 66995 TACOMA, WA 98464

SEARS/CBNA PO BOX 6282 SIOUX FALLS, SD 57117 SEVENTH AVENUE 1112 7TH AVE MONROE, WI 53566

SYNCB/CARE CREDIT 950 FORRER BLVD KETTERING, OH 45420

SYNCB/DISCOUNT TIRE C/O PO BOX 965036 ORLANDO, FL 32896

SYNCB/OLD NAVY PO BOX 965005 ORLANDO, FL 32896

SYNCB/WALMART PO BOX 965024 ORLANDO, FL 32896

TOYOTA MTR 3006 NORTHUP WAY STE 300 BELLEVUE, WA 98004

UNIFUND CCR LLC 10625 TECHWOODS CIRCLE CINCINNATI, OH 45242

US BK RMS CC PO BOX 108 SAINT LOUIS, MO 63166

US DEPT OF ED/GLELSI PO BOX 7860 MADISON, WI 53707

WEBBANK/FINGERHUT 6250 RIDGEWOOD ROAD SAINT CLOUD, MN 56303

WEBBANK/GETTINGTON 6250 RIDGEWOOD ROAD SAINT CLOUD, MN 56303