



TUTBLANK REGISTERED U.S. PAT. OFFICE
TUTTLE LAW PRINT, PUBLISHERS, RUTLAND, VT 05701
41907

Official Form No. 1 - Voluntary Petition - Rev. 12-86

United States Bankruptcy Court for the Southern District of Iowa

In re

SANDRA LYNN WALLACE

Case No. 89-57-c

Debtor (set forth here all names including trade names used by Debtor within last 6 years)
Social Security No. [redacted] Debtor's Employer Tax I.D. No. unknown if any

VOLUNTARY PETITION

- Petitioner's mailing address, including county, is 105 E. Benton, Madison County, Winterset, Iowa 50273
 - Petitioner has resided (or has been domiciled or petitioner's principal place of business has been or the principal assets of the petitioner have been) within this district for the preceding 180 days (or for a longer portion of the preceding 180 days than in any other district).
 - Petitioner is qualified to file this petition and is entitled to the benefits of Title 11, United States Code as a voluntary debtor.
 - (If appropriate) A copy of petitioner's proposed plan, dated N/A, is attached (or Petitioner intends to file a plan pursuant to Chapter 11, Chapter 12, or Chapter 13 of Title 11, United States Code.
 - (If petitioner is a corporation) Exhibit "A" is attached to and made part of this petition.
 - (If petitioner is an individual whose debts are primarily consumer debts) Petitioner is aware that (he or she) may proceed under Chapter 7, 11, 12, or 13 of Title 11, United States Code, understands the relief available under each such chapter, and chooses to proceed under Chapter 7 of such title.
 - (If petitioner is an individual whose debts are primarily consumer debts and such petitioner is represented by an attorney) A declaration or an affidavit in the form of Exhibit "B" is attached to and made a part of this petition.
- Wherefore, petitioner prays for relief in accordance with Chapter 7 (or Chapter 11 or Chapter 12 or Chapter 13) of Title 11, United States Code.

RELIEF GRANTED

FILED
JAN 09 1989
Clerk, U.S. Bankruptcy Court
Des Moines, Iowa

9:40 AM

Signed: [Signature] A. Zane Blessum
Attorney for Petitioner.
Address: 113 N. John Wayne Dr., P.O. Box 309
Winterset, Iowa 50273

[Signature] Sandra Lynn Wallace
Sandra Lynn Wallace Petitioner.

State of Iowa }
County of Madison }

ss:

I, Sandra Lynn Wallace, the petitioner named in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct.

Executed on 1-4-89
Signature: [Signature] Sandra Lynn Wallace
Sandra Lynn Wallace Petitioner.

-OR-

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] [or a member or an authorized agent of the partnership] named as petitioner in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct, and that the filing of this petition on behalf of the [corporation] [or partnership] has been authorized.

Executed on
Signature:

Inst. No. 1449
Book 38
Page 594
Filed for Record this 16 day of January 19 89 at 4:00 PM
Recording Fee \$115.00
Mery E. Welby, Recorder, By [Signature] Deputy

STATE OF IOWA, ss.
MADISON COUNTY,

In re

SANDRA LYNN WALLACE

Case No.

Debtor [set forth here all names including trade names used by Debtor within last 6 years] Social Security No. [redacted] Debtor's Employer's Tax I.D. No. unknown, if any

STATEMENT OF FINANCIAL AFFAIRS FOR DEBTOR NOT ENGAGED IN BUSINESS

Each question should be answered or the failure to answer explained. If the answer is "none" or "not applicable" so state. If additional space is needed for the answer to any question, a separate sheet, properly identified, and made a part hereof, should be used and attached. The term "original petition," as used in the following questions, shall mean the petition filed under Rule 1002, 1003, or 1004. (If this form is used by joint debtors wherever the word "debtor" or words referring to debtor are used they shall be read as if in the plural.)

1. Name and residence.

- a. What is your full name?
b. Have you used, or been known by, any other names within the 6 years immediately preceding the filing of the original petition herein?
c. Where do you now reside?
d. Where else have you resided during the 6 years immediately preceding the filing of the original petition herein?

- 1. a) Sandra Lynn Wallace
b) Sandy Wallace, Sandy L. Wallace and Sandy L. Gardner.
c) 105 E. Benton, Winterset, Iowa.
d) Rt. # 2, Box 45, Winterset, Iowa

2. Occupation and income.

- a. What is your occupation?
b. Where are you now employed?
c. Have you been in a partnership with anyone, or engaged in any business during the 6 years immediately preceding the filing of the original petition herein?
d. What amount of income have you received from your trade or profession during each of the two calendar years immediately preceding the filing of the original petition herein?
e. What amount of income have you received from other sources during each of these two years?

- 2.a) Laborer
b) Bakery Unlimited
119 N. John Wayne Dr.
Winterset, Iowa 50273
c) Yes

SRW Timber Inc.
RR 2, Box 45
Winterset, Ia 50273

SRW Pig Inc.
RR 2, Box 45
Winterset, Ia 50273

3. Tax returns and refunds.

- a. Where did you file your federal, state and municipal income tax returns for the two years immediately preceding the filing of the original petition herein?
b. What tax refunds (income and other) have you received during the year immediately preceding the filing of the original petition herein?
c. To what tax refunds (income or other), if any, are you, or may you be, entitled?

- d) SRW Timber Inc. received none
SRW Pig Inc. is unknown.

4. Financial accounts, certificates of deposit and safe deposit boxes.

- a. What accounts or certificates of deposit or shares in banks, savings and loan, thrift, building and loan and homestead associations, credit unions, brokerage houses, pension funds and the like have you maintained alone or together with any other person, and in your own or any other name within the two years immediately preceding the filing of the original petition herein?
b. What safe deposit box or boxes or other depository or depositories have you kept or used for your securities, cash, or other valuables within the two years immediately preceding the filing of the original petition herein?

- 3.a) Federal is filed in Kansas City. State taxes are filed in Des Moines.
b) None
c) None, extension of taxes made.
4.a) None
b) None



5. Books and records.

a. Have you kept books of account or records relating to your affairs within the two years immediately preceding the filing of the original petition herein?

b. In whose possession are these books or records? (Give names and addresses.)

c. If any of these books or records are not available, explain.

d. Have any books of account or records relating to your affairs been destroyed, lost or otherwise disposed of within the two years immediately preceding the filing of the original petition herein?

(If so, give particulars, including date of destruction, loss, or disposition, and reason therefor.)

6. Property held for another person.

What property do you hold for any other person? (Give name and address of each person, and describe the property, or value thereof, and all writings relating thereto.)

7. Property held by another.

Is any other person holding anything of value in which you have an interest?

(Give name and address, location and description of the property, and circumstances of the holding.)

8. Prior bankruptcy.

What cases under the Bankruptcy Act or title 11, United States Code have previously been brought by or against you?

(State the location of the bankruptcy court, the nature and number of each case, the date when it was filed, and whether a discharge was granted or denied, the case was dismissed, or a composition, arrangement, or plan was confirmed.)

9. Receiverships, general assignments, and other modes of liquidation.

a. Was any of your property, at the time of the filing of the original petition herein, in the hands of a receiver, trustee, or other liquidating agent? (If so, give a brief description of the property, the name and address of the receiver, trustee, or other agent, and, if the agent was appointed in a court proceeding, the name and location of the court, the title and number of the case, and the nature thereof.)

b. Have you made any assignment of your property for the benefit of your creditors, or any general settlement with your creditors, within one year immediately preceding the filing of the original petition herein? (If so, give dates, the name and address of the assignee, and a brief statement of the terms of assignment or settlement.)

10. Suits, executions, and attachments.

a. Were you a party to any suit pending at the time of the filing of the original petition herein? (If so, give the name and location of the court and the title and nature of the proceeding.)

b. Were you a party to any suit terminated within the year immediately preceding the filing of the original petition herein? (If so, give the name and location of the court, the title and nature of the proceeding, and the result.)

c. Has any of your property been attached, garnished, or seized under any legal or equitable process within the year immediately preceding the filing of the original petition herein? (If so, describe the property seized or person garnished, and at whose suit.)

11. Payment of loans, installment purchases and other debts.

a. What payments in whole or in part have you made during the year immediately preceding the filing of the original petition herein on any of the following: (1) loans; (2) installment purchases of goods and services; and (3) other debts? (Give the names and addresses of the persons receiving payment, the amounts of the loans or other debts and the purchase price of the goods and services, the dates of the original transactions, the amounts and dates of payments and, if any of the payees are your relatives or insiders, the relationship; if the debtor is a partnership and any of the payees is or was a partner or a relative of a partner, state the relationship; if the debtor is a corporation and any of the payees is or was an officer, director, or stockholder, or a relative of an officer, director, or stockholder, state the relationship.)

b. Setoffs.

What debts have you owed to any creditor, including any bank, which were set off by that creditor against a debt or deposit owing by the creditor to you during the year immediately preceding the filing of the original petition herein? (Give the names and addresses of the persons setting off such debts, the dates of the setoffs, the amounts of the debts owing by you and to you, and, if any of the creditors are your relatives, or insiders, the relationships.)

5.a) None to my knowledge.

b) If any, Richard Wallace has them, address unknown.

c) If any, Richard Wallace has them, address unknown.

d) Same as 5a and 5b and 5c

6. None

7. No

8. No

9. No

10.a) No

b) First Federal Savings & Loan Association of Creston vs. Richard C. Wallace, Sandy L. Wallace, et al, Equity No. 22949, Iowa District Court, Madison County, Iowa.

Farmers & Merchants State Bank v. Richard C. Wallace and Sandra L. Wallace, Law No. 23074, Iowa District Court, Madison County, Iowa.

Sears Roebuck & Company v. Sandy L. Wallace and Richard Wallace, S.C. No. 5833, Iowa District Court, Madison County, Iowa.

Clerk Cost on 11/23/87 in Dissolution of Marriage, DM3-865.

Oteo County National Bank v. Richard C. Wallace and Sandy Wallace, Sheriff's Levy No. 22852, Iowa District Court, Madison County, Iowa.

11.a) None

b) None

12. Transfers of property.

a. Have you made any gifts, other than ordinary and usual presents to family members and charitable donations, during the year immediately preceding the filing of the original petition herein? (If so, give names and addresses of donees and dates, description, and value of gifts.)

b. Have you made any other transfer, absolute or for the purpose of security, or any other disposition, of real or tangible personal property during the year immediately preceding the filing of the original petition herein? (Give a description of the property, the date of the transfer or disposition, to whom transferred or how disposed of, and, if the transferee is a relative or insider, the relationship, the consideration, if any, received therefor, and the disposition of such consideration.)

13. Repossessions and returns.

Has any property been returned to, or repossessed by, the seller or by a secured party during the year immediately preceding the filing of the original petition herein? (If so, give particulars including the name and address of the party getting the property and its description and value.)

14. Losses.

a. Have you suffered any losses from fire, theft, or gambling during the year immediately preceding or since the filing of the original petition herein? (If so, give particulars, including dates, names, and places, and the amounts of money or value and general description of property lost.)

b. Was the loss covered in whole or part by insurance? (If so, give particulars.)

15. Payments or transfers to attorneys.

a. Have you consulted an attorney during the year immediately preceding or since the filing of the original petition herein? (Give date, name, and address.)

b. Have you during the year immediately preceding or since the filing of the original petition herein paid any money or transferred any property to the attorney or to any other person on his behalf? (If so, give particulars, including amount paid or value of property transferred and date of payment or transfer.)

c. Have you, either during the year immediately preceding or since the filing of the original petition herein, agreed to pay any money or transfer any property to an attorney at law, or to any other person on his behalf? (If so, give particulars, including amount and terms of obligation.)

12.a) No

12.b) Yes

Sold real estate, Lot 11 of Berglund Addition, Madison County, Winterset, Iowa, for \$2,019.61, to Ward & Maxine Lecocq, Petitioner's parents on 9-15-88. Used for Attorney Fees.

13. Yes

The following real estate was repossessed by First Federal Savings & Loan Association of Creston, Iowa. To Wit:

The West 358.8 feet of Lot 8 and the South 225.5 feet of Lot 10, all in the Final Plat of Berglund Rural Estates Subdistrict, Sec. 32-77-27, Madison County, Iowa, subject to recorded water easements and subject to permanent easement for road and utility purposes along the West 25 feet of the South 225.5 feet of said Lot 10; Lot 9, Berglund Rural Estate Subdistrict, Sec. 32-77-27, Madison County, Iowa, the North 151 feet of which and the East 20 feet of which and the West 20 feet of which are all subject to recorded water easements. Property sold for \$63,041.51, property was mortgaged to First Federal Savings & Loan for \$62,336.66.

The following property was repossessed by Otoe County National Bank. To wit:

Model 820 Belser Blower

14. None

15.a) A. Zane Blessum, 113 N. John Wayne Dr., Winterset, Iowa, in the calendar year 1988, for a dissolution of marriage and this bankruptcy.

b) & c) same as 15.a

I, Sandra Lynn Wallace, declare under penalty of perjury that I have read the answers contained in the foregoing statement of affairs and that they are true and correct to the best of my knowledge, information, and belief.

I, Sandra Lynn Wallace

Executed on 4/4/89

Signature Sandra Lynn Wallace

In re

SANDRA LYNN WALLACE

Schedule A — STATEMENT OF ALL LIABILITIES OF DEBTOR

Debtor (set forth here all names including trade names used by Debtor within last 6 years
 Social Security No. [redacted] Employer's Tax Identification No. unknown if any

Schedules A-1, A-2, and A-3 must include all the claims against the debtor or his property as of the date of the filing of the petition by or against him.

SCHEDULE A-1 — CREDITORS HAVING PRIORITY

(1) Nature of Claim	(2) Name of creditor and complete mailing address including zip code	(3) Specify when claim was incurred and the consideration therefor; when claim is subject to setoff, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate; specify name of any partner or joint contractor on any debt	(4) Indicate if claim is contingent, unliquidated or disputed.	(5) Amount of Claim
a. Wages, salary, and commissions, including vacation, severance and sick leave pay owing to employees not exceeding \$2,000 to each, earned within 90 days before filing of petition or cessation of business (if earlier specify date).	NONE			\$
b. Contributions to employee benefit plans for services rendered within 180 days before filing of petition or cessation of business, (if earlier specify date).	NONE			\$
c. Deposits by individuals, not exceeding \$500 for each for purchase, lease, or rental of property or services for personal, family, or household use that were not delivered or provided.	NONE			\$
d. Taxes owing (itemize by type of tax and taxing authority).	NONE			
(1) To the United States				\$
(2) To any State				\$
(3) To any other taxing authority				\$
			Total	

Schedule A-2 — Creditors Holding Security

(1) Name of creditor and complete mailing address including zip code	(2) Description of security and date when obtained by creditor	(3) Specify when claim was incurred and the consideration therefor; when claim is subject to setoff, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate; specify name of any partner or joint contractor on any debt	(4) Indicate if claim is contingent, unliquidated, or disputed	(5) Market value	(6) Amount of claim without deduction of value of security
NONE				\$	\$
			Total		

No. 6, Schedule

Schedule A-3 — Creditors Having Unsecured Claims Without Priority Page 1 of 5

(1) Name of creditor including last known holder of any negotiable instrument and complete mailing address including zip code	(2) Specify when claim was incurred and the consideration therefor, when claim is contingent, unliquidated, disputed, subject to setoff, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate, specify name of any partner or joint contractor on any debt.	(3) Indicate if claim is contingent, unliquidated, or disputed.	(4) Amount of claim
Newton Clinic P.C. 321 E. 3rd Street N. Newton, Iowa 50208	Account # [REDACTED] Spring 1988		75 00
Skiff Medical Center P.O. box 1006 Newton, Iowa 50208-1006	Guarantor No. 508194 Spring 1988		193 00
Pathology Laboratory #LL3 1212 Pleasant St. Des Moines, Iowa 50309	Account # [REDACTED] Spring 1988		58 00
Palco P.O. Box 292 Belle Plaine, Iowa 52208	Between 1986 & present		162 44
National Association of Credit Management 7600 University Des Moines, Iowa 50311	Re: Triple F Feeds		239 27
Iowa Power 823 Walnut Des Moines, Iowa 50309	Premisse # 296-68030774 For service at RR 2, Box 45, Winterset, Iowa 50273 only		767 51
ACS Collections - Lafayette 628 Main St. Lafayette, In. 47902	Re: McDuff Credit		490 27
The Lane Agency P.O. Box 438 Norwalk, Iowa 50211	Account [REDACTED]		41 25
Farmer's Electric CoOp., Inc. P.O. Box 330 Greenfield, Iowa 50849	Fall of 1987		23 40
Cain Real Estate Att: Bob Cain 206 S. 4th Ave. Winterset, Iowa 50273	Raber Title Certificate Service		58 00
Chilton Accounts Receivable Management P.O. Box 280 Davenport, Iowa 52805	Re: Northwestern Bell For service to phone number 515-462-1612 ONLY!		219 21
B & B Sanitation P.O. Box 190 Earlham, Iowa 50072	For service in 1988		39 00
Ann-Marie Baughman, ACSW 2130 Grand Ave. Des Moines, Iowa 50312	Account held in name of Sandra Wallace Services in January & February of 1988		15 00
		Page Total	2,381 35

Schedule A-3 — Creditors Having Unsecured Claims Without Priority Page 2 of 5

Name of creditor (including last known holder of any negotiable instrument), complete mailing address including zip code (if unknown, so state)	Specify when claim was incurred and the consideration therefor; when claim is contingent, unliquidated, disputed, subject to setoff, evidenced by a judgment, negotiable instrument, or other writing or incurred as partner or joint contractor, so indicate; specify name of any partner or joint contractor on any debt	Amount of claim	
Clinical Med. 6th Ave. Maines, Iowa 50309		\$ 55	05
Maines Anesthesiologist P.C. E. 6th Maines, Iowa 50316		160	00
west Bank C Plan 15th St. Moines, Iowa 50309	Account # [REDACTED]	11,991	89
st Interstate Bank 0 Aurora Avenue Box 3660 andale, Iowa 50322-0660	loan	29,000	00
mers & Merchants State Bank 29 terset, Iowa 50273	Acct. # [REDACTED]	49,744	00
iliated Midwest Bancs Leasing, Inc. American Plaza levue, Nebraska 68005	Customer # 100657	4,857	56
lar Rent A Car 5 Fleur Drive Moines, Iowa 50321	For auto rented and never returned as far as debtor knows. Car was rented under the name of Charles Wallace. 1988 Ford Taurus was rented.	10,125	00
rst Federal Savings & Loan Assn of Creston l N. Pine eston, Iowa 50801	Real Estate that was mortgaged for this loan was sold at Sheriff's sale 4-15-88. Equity No. 22949, Iowa District Court, Madison County, Iowa.	58,450	76
sociates National Bank asanton, California 94582	RE: Shoppers Charge Mastercard Acct. # [REDACTED]	2,166	41
dison County Treasurer's Office rita A. Kellener, Treasurer. nterset, Iowa 50273	Property taxes for Lots 8, 9, and 10 of Berglund Addition, Madison County	904	00
s Moines Otolaryngology Associates, P.C. 40 5th Ave. s Moines, Iowa 50314		100	89
Page Total		167,555	56

Schedule A-3 — Creditors Having Unsecured Claims Without Priority Page 3 of 5

(1) Name of creditor (including last known holder of any negotiable instrument) and complete mailing address including zip code	(2) Specify when claim was incurred and the consideration therefor, when claim is contingent, unliquidated, disputed, subject to set-off, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate, specify name of any partner or joint contractor on any debt.	(3) Indicate if claim is contingent, unliquidated, or disputed.	(4) Amount of claim
All debts are for Richard Wallace as applied to Sandra Wallace, unless otherwise indicated.			
7 Flags Fitness & Raquet Club 2100 N.W. 100th St. Clive, Iowa 50322			156 00
American Express P.O. Box 757 Great Neck, N.Y. 11025-9992	Account [REDACTED]		934 57
Computer Cheque 8230 Hickman Rd. Suite 100 P.O. Box 3898 Urbandale, Iowa 50322	08-01-88 for returned check to Daugherty's Supermarket.		63 26
Radiology Professional Corp. 1212 Pleasant St., Suite 314 Des Moines, Iowa 50309	2-22-88		17 00
Heavy Medicine 1440 E. Grand, Suite 3B Des Moines, Iowa 50316	2-3-88 Account held in Sandy L. Wallace name		210 00
Earlham Medical Clinic 1001 Chestnut Earlham, Iowa 50072	Sept. 1987 to present		81 00
Surgery Center of Des Moines 1301 Penn Ave., Suite 100 Des Moines, Iowa 50316	August of 1988		99 4
OTO.-Head & Neck Surgical Assoc., P.C. 1215 Pleasant, Suite 408 Des Moines, Iowa 50309	July 1988		16 0
Children's Hosp Assoc Pediatrician Thomas Cmauliff, D.O. 1200 Pleasant Des Moines, Iowa 50309			368 1
Amoco Oil Company Credit Card Center P.O. Box 9014 Des Moines, Iowa 50306	Card # [REDACTED]		612 83
Iowa Methodist Medical Center 1200 Pleasant Street Des Moines, Iowa 50308	Account # [REDACTED]		14 80
Page Total			2,572 9

Schedule A-3 — Creditors Having Unsecured Claims Without Priority Page 4 of 5

Name of creditor (including last known holder of any negotiable instrument), complete mailing address including zip code (if unknown, so state)	Specify when claim was incurred and the consideration therefor, when claim is contingent, unliquidated, disputed, subject to setoff, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate; specify name of any partner or joint contractor on any debt	Amount of claim
rsen Harned VonMaur Box 8002 nport, Iowa 52808-8002	Account # [REDACTED] Goods purchased in 1987 and 1988	\$ 170 53
over Card Services, Inc. Box 620095 as, Texas 75262-0095	Card # [REDACTED] Account held in name of Sandy Wallace	910 53
services Gulfton Box 3026 ton, Texas 77253-3026	Account # [REDACTED] Account held in name of Sandy Wallace	9 97
erset Veterinary Center, P.C. 2, Box 45 erset, Iowa 50273	Account held in name of Sandy Wallace	24 00
to Elevator Inc. 468 to, Iowa 50069		305 37
Insurance Division ntion: Tony Schrader, Agent Licensing as Building, Fifth Floor Moines, Iowa 50319	Agent No. W-00000 Qual. 0706	10 00
h Law Firm Main Street l, Iowa 50003	Services in April, 1988.	361 25
tercard Box 911 Moines, Iowa 50330		5,183 89
< Card Center ociates National Bank Box 819076 ison, Texas 50273-9802	Re: Shopper's Charge Account # [REDACTED] Account held in name of Sandy L. Gardner	1,857 95
G.W. Fisher reen St. terset, Iowa 50273		46 00
rs, Roebuck and Company 0 Merle Hay Rd. Moines, Iowa 50322	Account # [REDACTED] Judgement entered 3-8-88.	1,646 13 plus interest
er David Rubin orney At Law Box 1751 ta Rosa, California 95402	Re: Transworld Systems Inc. Account # [REDACTED] Account held in name of Sandra Wallace	50 46
Michael Watson W. Court terset, Iowa 50273		50 46
	Page	Total 10,619 05

60

Schedule A-3 — Creditors Having Unsecured Claims Without Priority Page 5 of 5

Name of creditor (including last known holder of any negotiable instrument), complete mailing address including zip code (if unknown, so state)	Specify when claim was incurred and the consideration therefor, when claim is contingent, unliquidated, disputed, subject to setoff, evidenced by a judgment, negotiable instrument, or other writing, or incurred as partner or joint contractor, so indicate; specify name of any partner or joint contractor on any debt	Amount of claim
Montross Pharmacy 120 N. 1st Ave. Winterset, Iowa 50273		\$ 100 00
Page 1 Total		2,381
Page 2 Total		167,555
Page 3 Total		2,572 9
Page 4 Total		10,619
Page 5 Total		100
Grand Total		183,228

SCHEDULE B — STATEMENT OF ALL PROPERTY OF DEBTOR
 Schedules B-1, B-2, B-3, and B-4 must include all property of the debtor as of the date of the filing
 petition by or against him.

Schedule B-1 — Real Property

Description and location of all real property in which debtor has an interest (including equitable interests, interests in estates by the entirety, community property, life estates, leasehold interests, and powers exercisable for his own benefit)	Nature of interest (specify all deeds and written instruments relating thereto)	Market value of debtor's interest without deduction for secured claims listed on Schedule A-2 or exemptions claimed on Schedule B-4	
NONE		\$	
Total			

Schedule B-2 — Personal Property

Type of Property	Description and location	Market value of debtor's interest without deduction for secured claims listed on Schedule A-2 or exemptions claimed on Schedule B-4	
	thing, furniture & automobile & miscellaneous books & pictures	Total \$	1,100.00
	The following property is located at: 105 E. Benton St., Winterset, Ia 50273	\$ -0-	
		-0-	
money with banking institutions, and loan associations, brokerage credit unions, public utility companies, landlords, and others			
goods, supplies, and furnishings	household furniture	500	00
art objects, stamps, and other collections	miscellaneous books and wall hangings	50	00
clothing, jewelry, firearms, sports equipment, and other personal items	Personal clothing for debtor & debtor's dependents.	250	00
trucks, trailers, and other vehicles	1972 Ford Falcon	300	00
tools, and their accessories	None		

Schedule B-2 — Personal Property (Continued)

Type of property	Description and location	Market value of debtor's interest = deduction for secured claims less Schedule A-2 or exemption claim Schedule B-4
h. Livestock, poultry, and other animals	NONE	\$
i. Farming equipment, supplies and imple- ments	NONE	
j. Office equipment, furnishings, and sup- plies	NONE	
k. Machinery, fixtures, equipment, and supplies (other than those listed in items j and l) used in business	NONE	
l. Inventory	NONE	
m. Tangible personal property of any other description	NONE	
n. Patents, copyrights, licenses, franchises, and other general intangibles (speci- fy all documents and writings relat- ing thereto)	NONE	
o. Government and corporate bonds and other negotiable and nonnegotiable instruments	NONE	
p. Other liquidated debts owing debtor	NONE	
q. Contingent and unliquidated claims of every nature, including coun- terclaims of the debtor (give esti- mated value of each)	NONE	
r. Interests in insurance policies (name insurance company of each policy and itemize surrender or refund value of each)	NONE	
s. Annuities (itemize and name each issuer)	NONE	
t. Stock and interests in incorporated and unincorporated companies (itemize separately)	NONE	
u. Interests in partnerships	NONE	
v. Equitable and future interests, life es- tates, and rights or powers ex- ercisable for the benefit of the debtor (other than those listed in schedule B-1) (specify all written instruments relating thereto)	NONE	
	Total	

Schedule B-3 — Property Not Otherwise Scheduled

Type of property	Description and location	Market value of debtor's interest without deduction for secured claims listed in schedule A-2 or exemptions claimed in schedule B-4
Property transferred under assignment for benefit of creditors, within 120 days prior to filing of petition (specify date of assignment, name and address of assignee, amount realized therefrom by the assignee, and disposition of proceeds so far as known to debtor)	None	\$
Property of any kind not otherwise scheduled	None	
Total		

Debtor selects the following property as exempt pursuant to 11 U.S.C. § 522(d) the laws of the State of Iowa

Schedule B-4 — Property Claimed as Exempt

Type of property	Location, description, and so far as relevant to the claim of exemption, present use of property	Specify statute creating the exemption	Value claimed exempt
Total			\$

6c

SUMMARY OF DEBTS AND PROPERTY

(From the statements of the debtor in Schedule A and B)

Table with columns: Schedule, DEBTS, Total. Rows include A-1/a,b Wages, etc. having priority; A-1 (c) Deposits of money; A-1/(d) 1 Taxes owing United States; A-1/(d) 2 Taxes owing states; A-1/(d) 3 Taxes owing other taxing authorities; A-2 Secured claims; A-3 Unsecured claims without priority. Schedule A total 183,228.92

Table with columns: Schedule, PROPERTY, Total. Rows include B-1 Real property (total value); B-2/a Cash on hand; B-2/b Deposits; B-2/c Household goods; B-2/d Books, pictures, and collections; B-2/e Wearing apparel and personal possessions; B-2/f Automobiles and other vehicles; B-2/g Boats, motors, and accessories; B-2/h Livestock and other animals; B-2/i Farming supplies and implements; B-2/j Office equipment and supplies; B-2/k Machinery, equipment, and supplies used in business; B-2/l Inventory; B-2/m Other tangible personal property; B-2/n Patents and other general intangibles; B-2/o Bonds and other instruments; B-2/p Other liquidated debts; B-2/q Contingent and unliquidated claims; B-2/r Interests in insurance policies; B-2/s Annuities; B-2/t Interests in corporations and unincorporated companies; B-2/u Interests in partnerships; B-2/v Equitable and future interests, rights, and powers in personalty; B-3/a Property assigned for benefit of creditors; B-3/b Property not otherwise scheduled. Schedule B Total 1,100.00

UNSWORN DECLARATION UNDER PENALTY OF PERJURY

INDIVIDUAL(S): I (X) Sandra Lynn Wallace declare under penalty of perjury that I (we) have read the foregoing schedules, consisting of 26 sheets, and that they are true and correct to the best of my (our) knowledge, information, and belief.

CORPORATION: I, the (insert president or other officer or an authorized agent) of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.

PARTNERSHIP: I, a (insert member or an authorized agent) of the partnership named as debtor in this case, declare under penalty of perjury that I have read the foregoing schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Executed on Jan 4 8 1989 Signature Sandra Lynn Wallace Signature

2. Other Expenses:

a. Taxes (not deducted from wages or included in home loan payment or included in real estate taxes)	\$ -0-
b. Alimony, maintenance or support payments (attach additional sheet listing name, age, and relationship of beneficiaries)	\$ -0-
c. Insurance (not deducted from wages)	
Life	\$ -0-
Health	\$ -0-
Auto	\$ 7.00
Homeowner's or Renter's	\$ -0-
Other (specify)	
NONE	\$ -0-
Total insurance expenses	\$7.00
d. Installment payments:	
Auto	\$ -0-
Other (specify)	
None	\$
	\$
e. Transportation (not including auto payments)	\$25.00
f. Education (including tuition and school books)	\$ -0-
g. Food (receives food stamp assistance)	\$50.00
h. Clothing	\$ -0-
i. Medical, dental, and medicines	\$25.00
j. Laundry and cleaning	\$ -0-
k. Newspapers, periodicals, and books	\$ -0-
l. Recreation, clubs, and entertainment	\$ -0-
m. Charitable contributions	\$ -0-
n. Other expenses (specify)	
Child Care	\$ 250.00
	\$
Total estimated current monthly expenses	\$ 891.00

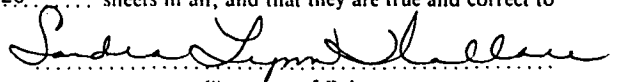
If you anticipate a substantial change in your expenses in the immediate future attach additional sheet of paper and describe.

Unsworn Declaration under Penalty of Perjury

I, Sandra Lynn Wallace, declare under penalty of perjury that I have read the foregoing schedule and any attachment, consisting of 26 sheets in all, and that they are true and correct to the best of my knowledge and belief.

1-4-89

Date



Signature of Debtor

SANDRA LYNN WALLACE

Debtor*

Social Security No. [REDACTED]

Debtor's Employer's Tax I.D. No. unknown if any

STATEMENT

Pursuant to Rule 2016(b)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- (1) The undersigned is the attorney for the debtor(s) in this case.
- (2) The compensation paid or agreed to be paid by the debtor(s) to the undersigned is:
 - (a) for legal services rendered or to be rendered in contemplation of and in connection with this case
 - (b) prior to filing this statement, debtor(s) have paid
 - (c) the unpaid balance due and payable is

\$ 1,000.00
\$ 90.00
\$ 910.00

- (3) \$ 90.00 of the filing fee in this case has been paid.
- (4) The services rendered or to be rendered include the following:
 - (a) analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to a petition under Title 11 of the United States Code.
 - (b) preparation and filing of the petition, schedules, statement of affairs and other documents required by the court.
 - (c) representation of the debtor(s) at the meeting of creditors.

(5) The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for ser performed, and

(6) The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, wi from earnings, wages and compensation for services performed, and

(7) The undersigned has received no transfer, assignment or pledge of property except the following for the value stated:

(8) The undersigned has not shared or agreed to share with any other person, other than with members of undersigned' firm, any compensation paid or to be paid except as follows:

Dated: Respectfully submitted,Attorney for Pet

Attorney's name and address: A. Zane Blessum, 113 N. John Wayne Drive, Winterset, Ia 5027



EXHIBIT "B"

(If petitioner is an individual whose debts are primarily consumer debts, this Exhibit "B" shall be completed and attached to the petition pursuant to paragraph (7) thereof.)

FOR COURT USE ONLY

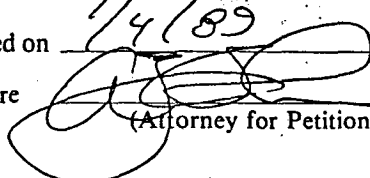
In re
SANDRA LYNN WALLACE

.....
Date petition filed

.....
Case Number

Debtor [set forth here all names including trade names used by Debtor within last 6 years]
Social Security No. [REDACTED] *Debtor's Employer's Tax I.D. No.* unknown Bankruptcy Judge
if any

I, A. Zane Blessum
the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that (he or she) may proceed under Chapter 7 or 13 of Title 11, United States Code, and have explained the relief available under each such chapter.

Executed on 4/4/89
Signature 
(Attorney for Petitioner)



United States Bankruptcy Court for the ... Southern District of ... Iowa

In re

SANDRA LYNN WALLACE

} Case No.

Debtor [set forth here all names including trade names used by Debtor within last 6 years]
Social Security No. [redacted] Debtor's Employer's Tax. I.D. No. unknown, if any

SCHEDULE OF CURRENT INCOME AND CURRENT EXPENDITURES FOR
INDIVIDUAL DEBTOR

[Complete this form by answering each question. If your answer to a question is "none" or "not applicable" so state.]

A. Family Status

1. The debtor is: (check one of the following)

Married Single Separated Divorced

2. The name of the debtor's spouse is ... N/A

3. The debtor supports the following dependents (other than the debtor's spouse):

Name	Age	Relationship to Debtor
Steven Scott Gardner	18	Son
Alexis Ann Wallace	6	Daughter
Ashley Ann Wallace	4	Daughter
Richard James Wallace	2	Son

B. Employment and Occupation

1. The debtor is employed by ... The Bakery Unlimited

(name of employer)

as ... a laborer

(nature of position)

2. The debtor is self-employed as ... N/A

(nature of business or profession)

at the following principal place of business:

(address)

3. The debtor's spouse is employed by ... N/A

(name of employer)

as

(nature of position)

4. The debtor's spouse is self-employed as ... N/A

(nature of business or profession)

at the following principal place of business:

(address)

C. Current Income

Give estimated average current monthly income of debtor and spouse, consisting of:

	<i>Debtor</i>	<i>Spouse</i>
1. Gross pay (<i>wages, salary, or commissions</i>)	\$ 177.00	\$ N/A
2. Take home pay (<i>gross pay less all deductions</i>)	\$ 160.00	\$
3. Regular income available from the operation of a business or profession	\$ -0-	\$
4. Other income:		
Interest and dividends	\$ -0-	\$
From real estate or personal property	\$ -0-	\$
Social security	\$ -0-	\$
Pension or other retirement income	\$ -0-	\$
Other (<i>specify</i>)		
NONE	\$	\$
	\$	\$
5. Alimony, maintenance, or support payments:		
Payable to the debtor for the debtor's use	\$ -0-	\$
Payable to the debtor for the support of another (<i>Attach additional sheet listing the name, age, and relationship to the debtor of persons for whose benefit payments are made.</i>)	\$ 700.00	\$
Total estimated current monthly income	\$ 860.00	\$ -0- N/A

If you anticipate receiving additional income on other than a monthly basis in the next six months (such as an income tax refund), attach additional sheet of paper and describe.

If you anticipate a substantial change in your income in the immediate future, attach additional sheet of paper and describe.

D. Schedule of Current Expenditures

Give estimated average current monthly expenditures of debtor and spouse, consisting of:

1. Home Expenses:		
a. Rent or home loan payment (<i>including any assessment or maintenance fee</i>)		\$ 300.00
b. Real estate taxes		\$ -0-
c. Utilities:		
Electricity	\$ 100.00	
Gas	\$ 47.00	
Water	\$ -0-	
Telephone	\$ 30.00	
Other (<i>specify</i>)		
Sanitation Service	\$ 7.00	
Total utilities		\$ 184.00
d. Home maintenance (repairs and upkeep)		\$ 50.00
Total, all home expenses		\$ 534.00

C. Current Income Continued

5. Persons for whose benefit payments are made from previous page.

<i>Name</i>	<i>Age</i>	<i>Relationship to Debtor</i>
.....Steven Scott Gardner.....	18Son.....
.....Alexis Ann Wallace.....	6Daughter.....
.....Ashley Ann Wallace.....	4Daughter.....
.....Richard James Wallace.....	2Son.....



United States Bankruptcy Court

For the Southern District of Iowa

NOTICE TO INDIVIDUAL CONSUMER DEBTOR(S)

If you intend to file a petition for relief under the bankruptcy laws of the United States, and your debts are primarily consumer debts, the Clerk of Court is required to notify you of each chapter of the Bankruptcy Code under which you may seek relief. You may proceed under:

- Chapter 7—Liquidation, or
- Chapter 11—Reorganization, or
- Chapter 13—Adjustment of Debts of an Individual
with Regular Income

If you have any questions regarding the information contained in this notice, you should consult with your attorney.

Clerk of Court

ACKNOWLEDGEMENT

I hereby certify that I have read this notice.

DATED: 1-4-89

Debtor Sandra Lynn Wallace

N/A

Joint Debtor, if any

INSTRUCTIONS: If the debtor is an individual, a copy of this notice personally signed by the debtor must accompany any bankruptcy petition filed with the Clerk. If filed by joint debtors, the notice must be personally signed by each.

UNITED STATES BANKRUPTCY COURT FOR THE Southern DISTRICT OF Iowa

In re

SANDRA LYNN WALLACE

CASE NO.

Debtor

STATEMENT

Social Security No. [redacted] Debtor's Employer's Tax I.D. No. unknown if any OF EXECUTORY CONTRACTS

NONE

UNSWORN DECLARATION UNDER PENALTY OF PERJURY

INDIVIDUAL: I, Sandra Lynn Wallace the petitioner named in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct.

JOINT INDIVIDUALS: We, and the petitioners named in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct.

CORPORATION: I, the of the corporation named as petitioner in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct, and that the filing of this petition on behalf of the corporation has been authorized.

PARTNERSHIP: I, a member—an authorized agent—of the partnership named as petitioner in the foregoing petition, declare under penalty of perjury that the foregoing is true and correct, and that the filing of this petition on behalf of the partnership has been authorized.

Executed on January 4 19 89

Signature: Sandra Lynn Wallace Sandra Lynn Wallace