FORM B10 (Official Form 10) (4/98)
\*FILE ORIGINAL FOR CHAPTERS 7 and 11, IN DUPLICATE FOR CHAPTER 13 FOR DATE-S1

United States Bankrupt	CH 7 _ CH13 CH11						
Northern District of Illinois, Eastern	PLEASE CHECK CHAPTER						
Name of Debtor		Case Number	PROOF OF CLAIM				
K-MART Corporation		02-02474	THOSE OF CLANVI				
NOTE: This form should not be used to make a claim for an administrative commencement of the case. A "request" for payment of an administrative et U.S.C. § 503	expense may l	ing after the be filed pursuant to 11	File Claim Form With:				
Name of Creditor (The person or other entity to whom the debtor owes mone property)	y or 🔲	Check box if you are aware that	United States Bankruptcy Court				
Helen Edgerton	any rela	rone else has filed a proof of claim ting to your claim. Attach copy of tement giving particulars.	P.O. Box A3613 Chicago, Illinois 60690-3612				
Name and Address Where Notices Should be Sent		Check box if you have never					
c/o Kenneth M. Rodgers, Esquire 1515 Market Street, Ste 1201	rece ban	eived any notices from the kruptcy court in this case.	Creditor #				
Philadelphia, PA 19102	fron	Check box if the address differs in the address on the envelope sent ou by the court.	THIS SPACE IS FOR COURT USE ONLY				
Account or other number by which creditor identifies debtor:		eck here if this claim					
911260014-0001	1_	<b>_</b>					
1. BASIS FOR CLAIM		amends	eviously filed claim dated:				
☐ Goods sold ☐ Services performed ☐ Money loaned ☐ Personal injury/wrongful doctor		☐ Wages, salaries, and compensation (Fill out below)					
	Your social secu						
☐ Taxes ☐ Other ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)	<del></del>	Unpaid compensation for					
		from(date)	to(date)				
2. DATE DEBT WAS INCURRED: November 26, 1999	3. 1	F COURT JUDGMENT, DATE OBT	AINED:				
Check this box if claim includes interest or other charges in additional charges.  5. Secured claim		cipal amount of the claim. Attach  Unsecured Priority Claim	itemized statement of all interest or				
Check this box if claim is secured by collateral (including a right of setoff).		<u> </u>					
Brief Description of Collateral:		☐ Wages, salaries, or commissions (up to \$4,300), *earned within 90 days before days before filing of the bankruptcy petition or cessation of the					
☐ Real Estate		debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3)  Contributions to an employee benefit plan-11 U.S.C. § 507(a)(4)					
☐ Motor Vehicle ☐ Other		Up to \$1,950* of deposits toward purchases, lease, or rental of property or services for personal, family, or household use -					
Value of collateral: \$		11 U.S.C. § 507(a)(6)  Alimony, maintenance or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7)					
Amount of arrearage and other charges at the	j		vernmental units 11 U.S.C. § 507(a)(8)				
Amount of arrearage and other charges at time case filed included in secured claim above if any \$		_					
in secured claim above, if any: \$	*Am with	Other-Specify applicable paragraph of 11 U.S.C. § 507(a)  *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.					
T. CREDITS: The amount of all payments on this claim has been of purpose of making this proof of claim.  B. SUPPORTING DOCUMENTS: Attach copies of supporting docume burchase orders, invoices, itemized statements of running accounts, conorgages, security agreements, and evidence of perfection of lien. DOCUMENTS. If the documents are not available, explain. If the documents, and evidence of perfection of lien.  DOCUMENTS. If the documents are not available, explain. If the documents. ANY ATTACHMENT MUST BE 8 -1/2" BY 11"  D. DATE-STAMPED COPY: To receive an acknowledgement of the fill eff-addressed envelope and an additional copy of this proof of claim state:  Sign and print the name and title, if any, of the credite this claim (attach copy of power of attorney, if any)	THIS SPACE IS EVERT USE ORTHERN DISTRICT OF ILL  MAR 8 2002  THIS SPACE IS EVERT USE OF ILL  MAR 8 2002  MAILROOM - MM						
penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisor	nment for ur	to 5 years or both 19 U.S.C. St					

KENNETH M. RODGERS AND STATES KENNETH M. RODGARS PROUIRE

Attorney I.D.: 24663

1515 Market Street, Suite 1201

Philadelphia, PA 19102

(215) 923-3330

THIS IS AN ARBITRATION MATTER ASSESSMENT OF DAMAGES HEARING IS REQUIRED.

FHIS MATTER WILL BE HEARD BY A BOARD OF ARBITRATORS AT THE TIME, DATE AND PLACE SPECIFIED BUT, IF ONE GA

TORE PARTIES IS NOT PRESENT AT OHE FEARING THE MASTER TO THE SAME TIME

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4947 TO 184

ATTORNEY FOR PLAINTIFF

HELEN EDGERTON 158 N. 23rd Street Philadelphia, PA 19103

VS.

K-MART 901-99 Market Street Philadelphia, PA 19107



COURT OF COMMON PLEAS PHILADELPHIA COUNTY 2001

TERM, 2001

NO.

C00'709

## CIVIL ACTION COMPLAINT 20- Other personal injury

#### NOTICE

You have been sued in court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this complaint and notice are served, by entering a written appearance personally or by attorney and filing in writing with the court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the court without further notice for any money claimed in the complaint or for any other claim or relief requested by the plaintiff. You may lose money or property or other rights important to you.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

PHILADELPHIA BAR ASSOCIATION LAWYER REFERRAL AND INFORMATION SERVICE ONE READING CENTER PHILADELPHIA, PENNSYLVANIA 19107 TELEPHONE: (215) 238-1701

#### **AVISO**

Le han demandado a usted en la corte. Si usted quiere defenderse de estas demandas expuestas en las páginas siguientes, usted tiene veinte (20) dias de plazo al partir de la fecha de la demanda y la notificación. Hace falta asentar una comparencia escrita o en persona o con un abogado y una comparencia escrita o en persona o con un abogado y entregar a la corte en forma escrita sus defenses o sus objeciones a las demandas en contra de su persona. Sea avisado que si ustad no se defiende, la corte tomará medidas y puede continuar la demanda en contra suya sin previo aviso o notificación. Además, la corte puede decidir a favor del demandante y requiere que usted cumpla con todas las provisiones de esta demanda. Usted puede perder dinero o sus propiedades u otros derechos importantes para usted.

PARE USERGI.

LLEVE ESTA DEMANDA A UN ABOGADO INMEDIATAMENTE. SI NO TIENE ABOGADO O SI NO TIENE EL DINERO SUFICIENTE DE PAGAR TAL SERVICO, VAYA EN
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CUYA DIRECCIÓN SE ENCUENTRA ESCRITA ABAJO
PARA AVERIGUAR DONDE SE PUEDE CONSEGUIR
ACISTENCIA LEGAL ASISTENCIA LEGAL

ASOCIACIÓN DE LICENCIADOS DE FILADELFIA Servicio De Referencia E Información Legal One Reading Center Filadelfia, Pennsylvania 19107 Telefono: (215) 238-1701

- 1. Plaintiff, Helen Edgerton, is an adult individual residing at the address contained in the caption.
- 2. KMART, is upon information and belief, a corporate entity organized and existing under the laws of the Commonwealth of Pennsylvania, with a retail store located at 901-99 Market Street, Philadelphia, Pennsylvania 19107.
- 3. On or about November 26, 1999, plaintiff was shopping at defendants' store located at 901-99 Market Street, Philadelphia, Pennsylvania. Plaintiff boarded an escalator to go to the second floor of the store.
- 4. The step of the escalator on which she was standing jerked forward suddenly throwing plaintiff backwards, and dragging her all the way up to the second floor landing, causing injuries hereinafter more fully set forth.
- 5. On November 26, 1999, and at all times pertinent, plaintiff was an business invitee of defendants' store.
- 6. Defendants, by and through their agents, servants, employees, workmen and /or representatives were negligent in the following respects:
  - a. Defendants failed to maintain the escalator in question in a safe condition;
- b. Defendants failed to repair the escalator in question to make it safe to use by its patrons or others lawfully on the premises; and
- c. Defendants failed to warn its patrons or others lawfully on the premises of the unsafe condition of the escalator.
- 7. Solely by reason of the aforesaid negligence of the defendants, their agents, servants, employees, workmen and/or representatives, plaintiff suffered the following injuries, including but not limited to the following: exacerbation of back pain and neck pain, injury to left

wrist, as well as a severe shock to the nerves and nervous system.

- 8. Plaintiff in the past and will in the future suffer severe pain and agony as a result of her injuries.
  - 9. As a result of her injuries, plaintiff has been compelled to incur medical expenses.
- 10. Solely as a result of the aforesaid injuries, plaintiff has suffered a loss of life's enjoyment both in the past and in the present, and may continue to suffer such a loss in the future.

WHEREFORE, Plaintiff demands judgment against the Defendant, KMART, in a sum not in excess of FIFTY THOUSAND (\$50,000) DOLLARS.

KENNETH M. RODGERS, ESQUIRE ATTORNEY FOR PLAINTIFF

### **VERIFICATION**

HELEN EDGERTON, being duly sworn according to law, deposes and says that she is plaintiff in the within-entitled action, and that the facts set forth in the foregoing Civil Action Complaint are true and correct to the best of her knowledge, information and belief. The undersigned understands that the statements therein are made subject to the penalties of 18 Pa. C.S. Sec. 4904 relating to unsworn falsification to authorities.

The Edgerton
HELEN EDGERTON

Dated:

1015 Chestnut Street, Suite 1520 Philadelphia, PA 19107

215 955 8430 Fax: 215 923 5828

November 7, 2001

Thomas

Jefferson

University

Kenneth M. Rodgers, P.C. **Suite 1201** 1515 Market Street Philadelphia, PA 19102-1921

RE: **HELEN EDGERTON v. KMART** DATE OF ACCIDENT: 11/26/99

Dear Mr. Rodgers:

This is in response to your recent inquiry regarding Helen Edgerton. She has been under my rheumatologic care since February 22, 1999 for a variety of problems including rheumatoid arthritis, osteoarthritis and spinal stenosis. Her past medical history is also notable for infectious hepatitis, jaundice, stomach ulcer, cataracts, glaucoma, amenia, nephrolithiasis and two prior back operations. Her first surgery took place during the 1950's for treatment of multiple herniated discs and included a lumbar fusion from L3 - L5. She had significant relief of symptoms until the mid to late 1980's. At that point she underwent a second procedure (L3-L4 -L5-S1 bilateral lumbar laminectomy) with mild improvement. Subsequent to that time she was diagnosed with reflex sympathetic dystrophy and underwent 32 lumbar sympathetic blocks at the Jefferson Pain Center. She did well until the mid 1990's at which time she was seen by Dr. John Paterson her at Jefferson who diagnosed polymyalgia rheumatica and then eventually rheumatoid arthritis. At the time of her initial evaluation with me, Ms. Edgerton related a history of right hip pain with radiation to the right shin that would occur after walking two blocks or longer. She also noted neck pain, a recent history of left wrist swelling and right knee "like a knot in my knee" discomfort.

The findings of the initial evaluation showed Heberden's and Bouchard's nodes at the DIP and PIP joints respectively. She also had an 18 cm surgical scar extending from L-1 through S-1 overlying the low back. She also had crepitus of both knees with tenderness on the right and a 1 cm right patellar nodule. The feet exhibited bony overgrowth of both first MTP joints. There were varicose veins in the lower extremities. Neurologic exam revealed wasting of the thenar and interosseous muscles of the hands as well as bilateral carpal tunnel release scars. She also had diminished left hand grip strength and weakness of the left wrist extensor muscles. The lower extremity joint exam was notable for right ileopsoas and hamstring muscle weakness bilaterally (all 4/5) compared to 5/5 in other extremities.

Her medications at the first visit included prednisone 5 mg po daily, methotrexate 7.5 po weekly, iron, multivitamins, Miacalcin nasal spray, calcium and vitamin C.

At the first visit I increased the dose of her Methotrexate and ordered additional

RE: HELEN EDGERTON v. KMART DATE OF ACCIDENT: 11/26/99

laboratory studies to assess the activity of arthritis. Additionally, an MRI scan of the lumbar spine was performed to look for recurrent spinal stenosis after her prior surgeries. The lumbar spine study did indeed reveal right lateral recess spinal stenosis due to a retained disc fragment at the L5-S1 level. Due to repeated arthritis flares, Ms. Edgerton's prednisone and Methotrexate was subsequently increased. She was also started on ANSAID 100 mg po bid as well as Pamelor 10 mg po qhs for neuropathic pain.

When subsequently seen on July 2, 1999 she was still having back pain as well as neck pain. She related a waxing and waning pattern of symptoms and was intolerant of some of her medications. The patient also related that a GI evaluation had been recently been initiated by her primary care physician.

Upon follow up on September 1999 the patient related that she had had three falls over the summer in Center City due to right leg weakness. She had broken two ribs and started to notice the onset of right ankle tingling. The physical examination was essentially the same and I initiated a referral to the Jefferson Pain Center for epidural steroids for treatment of her spinal stenosis. A DEXA scan was also ordered to look for possible osteoporosis.

Mrs. Edgerton was next seen on October 22, 1999 and complained of right leg weakness and instability with a pins and needle sensation in both feet. She mentioned that her symptoms would typically flare after walking 5 blocks or standing longer than 10-15 minutes. She also complained of right knee pain. She was given a Warm N Form back orthotic for her spinal stenosis and started on calcium and vitamin D for osteoporosis prophylaxis. She was prescribed Ridaura for her rheumatoid arthritis and told to taper her prednisone.

Mrs. Edgerton, as you know, fell at KMART on November 26, 1999. The details of the accident were related to me on December 13, 1999 at a subsequent follow up visit. She mentioned that she fell on an escalator, hurt her back and that her back pain had significantly increased since that time. She also injured her left wrist and was complaining of bilateral leg pain. Her right leg paresthesias was unchanged. I thought she was most likely having a spinal stenosis flare but also ordered a bone scan to rule out a new fracture related to her fall. The bone scan showed no fracture. I reiterated my prior treatment recommendation for spinal stenosis including use of a back support and follow up at the Pain Center.

Mrs. Edgerton was next seen in February 2000. She had just started back injections at the Pain Center with Dr. Jalali with some relief but was unable to wear the back support that I had prescribed. She had been recently treated for an infection and had to be taken off Methotrexate. The steroids were further tapered and she was advised to start using a cane. She subsequently developed a second infection and remained off Methotrexate until April 11, 2000. By that time she had already undergone two epidural steroid injections with Dr. Jalali but was

RE: HELEN EDGERTON v. KMART DATE OF ACCIDENT: 11/26/99

still having back pain. Her physical examination at that time showed bilaterally iliopsoas muscles, hamstring and quadriceps muscle weakness. She started on Vioxx 12.5 mg po daily and vitamin B6, 100 mg po bid for further treatment of her back and neuropathic pain. At her visit on June 12, 2000 the patient complained that she was unsteady on her feet. She also noted increased extremity paresthesias. She was status post two epidural steroid injections with mild relief. The patient related that she had had a prior MRI of the cervical spine done earlier in the year on January 15, 2000. We were able to retrieve a copy of the study and noted that she had two herniated discs at C4-C5 and C5-C6. She was referred back to the Pain Center for her third epidural and also started on Neurontin for neuropathic pain. At that time she seemed unsure of the medications she was taking and was asked to bring in all her medicines at a subsequent visit.

Upon return on July 24, 2000 she mentioned that her back pain was worse and her walking was more limited. She had a constant "pins and needle sensation in the right leg". She had had a recent EMG of both hands done to evaluate hand paresthesias. The study apparently showed bilateral carpal tunnel as well as bilateral cubital tunnel syndrome. On exam her gait was noted to be more unsteady than usual and she would have a tendency to fall backwards. She was also complaining of right leg weakness. For treatment her Neurontin was increased and she was asked to obtain a walker to prevent falls. I also discussed the possibility of acupuncture treatments as a supplementary therapy to her epidural steroids.

At the following visit on September 18, 2000, Mrs. Edgerton mentioed that the right leg pain had become steadily worse. She had also lost feeling in her left hand and was complaining of dysphagia and odynophagia. She also related a history of painful swelling and/or soreness of the left ankle, foot and wrist. Her examination at that time was notable for left wrist swelling, right knee pain on range of motion and left ankle swelling and tenderness with painful range of motion. I told Mrs. Edgerton she was having an apparent flare of rheumatoid arthritis. I therefore increased her prednisone dose as well as her Methotrexate. She was also given Percocet to take for pain.

Later that fall at the November 10<sup>th</sup> visit she mentioned that she had gotten five injections performed by Dr. Jalali and was finally noticing some improvement in her back and leg pain. However, she still felt a sensation of bilateral lower extremity weakness and noted a tendency to fall. Her arthritis was also under better control. She was having trouble swallowing her Percocet. Her exam was notable for unsteady gait and bilateral weakness of the iliopsoas, quadriceps and hamstring muscles. She also had ankle plantar flexor weakness noted for the first time bilaterally.

Mrs. Edgerton again presented on an emergency basis to the office on February 12, 2001 for a one week history of nausea, vomiting, diarrhea and poor intake. She was subsequently admitted to the hospital under the care of Dr. Merli and Dr. Ussai, her primary care physicians. She was treated for viral gastroenteritis and eventually recovered. Her arthritis had improved and

RE: HELEN EDGERTON v. KMART DATE OF ACCIDENT: 11/26/99

I initiated another steroid taper.

At the May 4, 2001 visit her joints were better except for mild right ankle swelling and right instability. She was still having difficulty walking and was "bumping into things". However, she had not fallen. Her exam showed significant lower extremity edema but no joint swelling. I asked her to further reduce her prednisone dose and prescribed venous insufficiency stockings. The patient's primary care physician, Dr. Katherine Ussai had recently begun reevaluation for her weakness and lower extremity pain. A MRI scan of the cervical spine was repeated on May 19, 2001 and showed cervical spondylosis and a continued herniated disc at C4-C5. The patient had also seen Dr. Franca Cambi for neurologic evaluation. An EMG conduction study of the lower extremities were performed on April 11, 2001 which showed a mild, chronic polyradiculopathy mainly involving the L5 and S1 levels. A MRI scan of the hip was normal. A follow up MRI of back done on May 19, 2001 showed no new changes compared to the prior study.

On June 19th, Mrs Edgerton related she was unsteady on her feet but generally had less pain that previously noted. She was still suffering from ankle edema and had not yet obtained her venous insufficiency stockings. I told her that the rheumatoid arthritis is apparently doing well on Methotrexate and we asked her to gradually taper and discontinue her steroids. The following July she was admitted to Jefferson for a "left hand infection". She was also treated for possible pneumonia and evaluated for a lung nodule. When the nodule persisted despite antibiotic treatment, she eventually underwent a thorascopic lung biopsy.

Mrs. Edgerton related the details of her hospitalization to me during her follow up visit on August 3, 2001. At that time she was also complaining of right shoulder pain. Her examination revealed right subdeltoid bursal tenderness with pain on flexion, abduction and external rotation. Her impingement sign was positive. She also had mild pitting edema of the right leg and trace edema on the left. I injected her right subdeltoid bursa and right rotator cuff tendons with cortisone and lidocaine. She was asked to restart her Neurontin for extremity paresthesias. We also had her sign a release form so that we could obtain her hospital records.

Mrs. Edgerton was seen most recently in the office on September 25, 2001. She was complaining of pain at the lung biopsy sites, still having trouble swallowing and also complaining of leg and foot pain with "shooting pains" down both extremities. She had also begun losing weight. She was complaining of left wrist pain. At the visit she also filled out the Focus Health Assessment questionnaire which indicated moderate to severe disability related to her various musculoskeletal problems. Specifically she noted difficulty bathing, reaching down to lift objects from the floor and doing household cleaning. She stated that she was unable to shampoo her hair. She indicated her pain was a 9 on a 0 to 10 pain scale. She also expressed extreme dissatisfaction with her health. Her physical exam at that time was mainly notable for left wrist swelling and tenderness. Her wrist was injected with 40 mg of Depomedrol and 1 cc of

RE: HELEN EDGERTON v. KMART DATE OF ACCIDENT: 11/26/99

lidocaine. I also asked her to apply 2 or 3 5% Lidoderm patches to the painful area of her chest wall daily. She had previously stopped her Neurontin since she did not find it to be helpful. She started Elavil 10 mg po qhs for neuropathic pain and was advised to advance the dose as tolerated.

At the present time it is clear that Mrs. Edgerton is disabled, in pain and quite unsteady on her feet despite multiple treatments including injections. The majority of her problems, in my view relate to her spinal stenosis. This was clearly present before her accident at KMART but clearly became worse following the accident. Since trauma to the spine may exacerbate or even cause spinal stenosis to a reasonable degree of medical certainty, it is my professional opinion that the accident further contributed to her present pain, suffering and disability. Unfortunately, her problems are chronic and unlikely to change. She is not a candidate for back surgery at this time given her other medical problems and her two prior operations. Mrs. Edgerton will be seen for follow up during the next 2-3 months. Please contact me for any further questions related to her problems or care.

Sincerely,

Frederick B. Vivino, M.D., FACR

Clinical Associate Professor of Medicine

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Jefferson Medical College

FBV/gc

MARSHALL, DENNEHEY, WARNER, COLEMAN & GOGGIN
BY: Jacqueline H. Canter, Esq.
Identification No. 47080
1845 Walnut Street
Philadelphia, PA 19103
(215) 585-2805

Attorney for Defendant

HELEN EDGERTON

COURT OF COMMON PLEAS

PHILADELPHIA COUNTY

V.

•

JULY TERM, 2001

K-MART

NO. 709

# **NOTICE OF BANKRUPTCY FILING AND AUTOMATIC STAY**

## TO THE PROTHONOTARY:

Please take notice that on Tuesday, January 22, 2002, defendant, Kmart Corporation, filed for bankruptcy protection in the United States Bankruptcy Court for the Northern District of Illinois, the Honorable Susan Pierson Sonderby presiding. The matter was assigned Case No. 02-02474.

MARSHALL DENNEHE

BY

JACQUELINE H. CANTER, ESQ.

Attorney for Defendant

Date: January 30, 2002

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# **VOLUNTARY PETITION**

United States Bankruptcy Court						TWOLINTARY PETITION				
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Other Names used by Debte	or in the last 6	years				(i	nclude m	arried, maio	d by Joint Debtor in the last 6 years iden, and trade names):	
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Corporation  Firship	□ Commod	lity Brok	<u></u>			'	□ Chapter □ Sec. 304	4-Case anci	illary to foreign proceeding	
Nature of Debts (Check one box)  Consumer/Non-Business   Business  Chapter 11 Small Business (Check all boxes that apply)  Debtor is a small business as defined in 11 U.S.C. § 101.  Debtor is and elects to be considered a small business under  11 U.S.C. § 1121(e). (optional)					у)		Filing Fee (Check one box)  B Pull Filing Fee attached.  D Filing Fee to be paid in installments (Applicable to individuals only)  Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.			
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	Signature of Estimates				
CD 1	Charles C. Consway				
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e of Attorney for Debtor(s)	copy of this document.				
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John Wm. Butler, Jr.					
finted Name of Attorney for Debtor(s)	Printed Name of Bankruptcy Petition Preparer				
Skadden, Arps, Slate, Meagher & Flom (Illinois)					
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333 W. Wacker Drive, Chicago, IL 60606					
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nuary 22, 2002	assisted in preparing this document:				
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	If more than one person prepared this document, to the appropriate official form for each person.	ELECTI ROUTE OTHER STORM SOTTONIA			
To be completed if debtor is required to file periodic reports (e.g., forms 10K and					
To be completed if debtor is required to the personnel of					
ne Securities Exchange Act of 1934 and is requesting to be seen and made a part of this petition.	Signature of Bankruptcy Petition Preparer				
	<b>\</b>	-			
EXHIBIT B	Date				
To be completed if debtor is an individual whose debts are primarily consumer debts.	Date				
the attorney for the petitioner named in the folegoing petitions, see 11, 12, or 13 of	A handmentey petition preparer's failure to con	aply with the provisions of title !!			
informed the petitioner that the or sne may proceed and shape by the states Code, and have explained the relief available under each such	and the Federal Rules of Bankruptcy Procedur	e may result in tines or imprisonment			
hapter.	or both 11 U.S.C. § 110; 18 U.S.C.§ 156.				
X Date					
Signature of Attorney for Debtor(s)  Date					