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2 ATTORNEY AT LAW  
3 2001 WAYNE AVENUE, SUITE 203  
4 SAN LEANDRO, CA 94577  
5 (510) 895-2580

6 Attorney for Debtors BRIAN BURNS  
7 and TERESA BURNS DBA BAY AREA HIGH REACH

8 UNITED STATES BANKRUPTCY COURT  
9 NORTHERN DISTRICT OF CALIFORNIA

10 IN RE:

11 BRIAN BURNS, TERESA BURNS,  
12 DBA BAY AREA HIGH REACH,

CASE NO. 9540733TS  
FIRST AMENDED  
CHAPTER 7  
MAILING MATRIX

13 Debtors. /

14 (The penalties for making a false statement or concealing  
15 property is a fine of up to \$500,000 or imprisonment for up  
16 to 5 years or both. 18 U.S.C. Secs. 152 and 3571.9)

17 DECLARATION

18 We, BRIAN BURNS and TERESA BURNS, named as the debtors  
19 in this case, declare under penalty of perjury that we have  
20 read the foregoing mailing matrix, which lists 35 creditors  
21 and consists of 5 sheets, and that it is true and correct to  
22 the best of our information and belief.

23  
24 Dated: 2-6-95

Brian P. Burns  
Brian Burns, Debtor

25  
26 Dated: 2-6-95

Terese Burns  
Terese Burns, Joint Debtor

27  
28

9



11400 Commerce Park Drive  
Reston, Virginia 22091-1506

# CERTIFICATE OF SERVICE

1-800-BNC-5055

District/off: 0971-4  
Case: 95-40733

User: dstev  
Form ID: B9A

Page 1 of 2  
Total Served: 44

Date Rcvd: 02/07/95  
Date Served: 02/09/95

db Brian Burns, 2577 Nordell Ave., Castro Valley, CA 94546  
jdb Theresa Burns, 2577 Nordell Ave., Castro Valley, CA 94546  
aty Dennis S. Reid, 2001 Wayne Ave #203, San Leandro, CA 94577  
tr Richard J. Spear, 405 14th St. #1000, Oakland, CA 94612-2795  
smg I.R.S., Attn: STOP 5335/SPF, P.O. Box 2900, Sacramento, CA 95812-2900  
smg IRS, Special Procedures, 1301 Clay St. #1000 S, Oakland, CA 94612-5210  
smg Labor Commissioner, 360 22nd St. Rm. 500, Oakland, CA 94612-3026  
smg State Franchise Tax Board, Special Procedures, P.O. Box 2952, Sacramento, CA 95812-2952  
smg State of California EDD, Bankruptcy Unit - MIC 92E, P.O. Box 826880, Sacramento, CA 94280  
smg U.S. Attorney, Civil Division, 450 Golden Gate Ave., San Francisco, CA 94102-3400  
ust Office of the U.S. Trustee / Oak, Federal Bldg., 1301 Clay St. #690N, Oakland, CA 94612-5202  
770235 Alameda County, Dept of Environmental Health, 1131 Harbor Bay Parkway 2nd Floor, Alameda California 94502  
770239 Allergy Cons Med Grp, D A Fernandes M D, 20055 Lake Chabot Road Suite 220, Castro Valley CA 94546  
770251 Allstate Insurance Company, c o Bell Corporation of America, P O Box 6460, Scottsdale AZ 85261  
770231 Allstate Insurance Company, P O Box 2246, Brea CA 92622  
770242 American Medical Response West, P O Box 7780, Fremont CA 94537-7780  
770233 Bay City Boiler Engineering, c o Aetna, P O Box 13716, Sacramento CA 95853  
770248 Carpenter s Health Welfare Trust, c o M Catherine Jones Esq, 875 Battery Street 3rd Floor,  
San Francisco CA 94111  
770237 Citibank Preferred, P O Box 6100, The Lakes NV 88901  
770250 Citicorp Credit Services, c o Pacific Coast Collections Inc, P O Box 23327, San Diego CA 92123  
770244 Citicorp Credit Services Inc, P O Box 5990, San Mateo CA 94402  
770225 Consolidated Finance Group Inc, P O Box 411605, Kansas City MO 64141  
770226 Cook Brown Rediger Prager, 555 Capitol Mall Suite 425, Sacramento CA 95814  
770236 Eden Hospital, c o Suzanne L Decker Esq, 1611 Telegraph Avenue Suite 1001, Oakland CA 94612  
770252 Eden Hospital, c o credit Service of Northern, California, 1611 Telegraph Avenue Suite 1001, Oakland CA 94612  
770241 Eden Hospital Medical Center, 20103 Lake Chabot Road, Castro Valley CA 94546-5367  
770230 Eden Radiology Medical Group, P O Box 5016, San Ramon CA 94583  
770253 Eden Radiology Medical Group, c o AMA Collection Services, P O Box 579, San Leandro CA 94577  
770238 Farwest Safety Inc, c o Audley Audley, 51 Tunnel Road, Berkeley CA 94705  
770247 Farwest Safety Inc, c o Douglas Gooding Esq, 535 Pacific Avenue 2nd Floor, San Francisco CA 94133  
770240 Fireman s Fund Insurance Company, P O Box 808036, Petaluma CA 94975  
770234 General Motors Acceptance Corporation, 2530 Arnold Drive Suite 300, Martinez California 94553  
770223 Jose and Sahara Barron, c o Jaime Pena Esq, 345 East Main Street Suite 501, Stockton CA 95202  
770227 Lori Morales Kelly Morales, Justin Morales and Chaz Morales, c o Manuel L Furtado Esq, 22274 Main Street,  
Hayward CA 94541  
770228 Melvin Kauffman, c o Normoyle Newman, 1700 Standiford Ave Ste A 340, Modesto CA 95350  
770224 Orix Credit Alliance Inc, 199 South Los Robles Ave Suite 810, Pasadena CA 91101  
770245 Patterson Lift Trucks Inc, 975 Industrial Parkway West, Hayward CA 94544  
770221 Raymond Slayton, c o Joyce Ann Weiss Esq, 171 12th Street Suite 100, Oakland CA 94607  
770243 Regional Ambulance Inc, c o Bay Area Credit Service, 2185 The Alameda Suite 1, San Jose CA 95126-1109  
770222 Shawn H Cantlin, c o United Services, Automobile Association, P O Box 15506, Sacramento CA 95852  
770232 St Paul Fire and Marine, Insurance Company, P O Box 10760, Phoenix AZ 85064-0760  
770249 State of California, c o Daniel C Murphy Esq, 595 Market Street Suite 1700, P O Box 7444,  
San Francisco California 94120  
770246 Trojan Inc, 22 Loomis Street, San Francisco CA 94124  
770229 Whitman Feldstein M D, 27225 Calaroga Avenue, Hayward CA 94545

# United States Bankruptcy Court

Re

NORTHERN District of CALIFORNIA

In re BURNS, BRIAN & TERESA DBA BAY AREA HIGH REACH  
Debtor

3 53 PM '93

Case No. 95-40733TS  
(If known)

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E and F to determine the total amount of the debtor's liabilities.

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A Real Property	YES	1	\$ 185,000		
B Personal Property	YES	4	\$ 10,700		
C Property Claimed as Exempt	YES	1			
D Creditors Holding Secured Claims	YES	1		\$ 170,000	
E Creditors Holding Unsecured Priority Claims	YES	2		\$ 66,000	
F Creditors Holding Unsecured Nonpriority Claims	YES	7		\$ 706,750	
G Executory Contracts and Unexpired Leases	YES	1			
H Codebtors	YES	1			
I Current Income of Individual Debtor(s)	YES	1			\$ 5,475
J Current Expenditures of Individual Debtor(s)	YES	1			\$ 5,470
Total Number of Sheets of All Schedules =>		20			
			Total Assets =>	\$ 195,700	
				Total Liabilities =>	\$ 942,750

Handwritten signature or mark.



In re Burns, Brian & Teresa  
Debtor:

Case No. 95-40733TS  
(If known)

## SCHEDULE D—CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interest such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H—Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1079607 Loan America, Inc. P.O. Box 169016 Miami, FL 33116-9016			First Mortgage held on debtors single family residence.  VALUE \$ 185,000	x			\$151,000	-0-
ACCOUNT NO. 11589260 Security Pacific Financial Services 39350 Civic Center Drive Fremont, CA 94536			2nd Mortgage held on debtors single family residence  VALUE \$ 185,000	x			\$19,000	-0-
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					

-0- continuation sheets attached

Subtotal → (Total of this page)	\$ 170,000
Total → (Use only on last page)	\$ 170,000

(Report total also on Summary of Schedules)

## SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H—Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 742852 Raymond Slayton c/o Joyce Ann Weiss, Esq. 171 12th St Ste 100 Oakland, CA 94607		Liability arising from personal injury lawsuit alleging negligence.		x		\$100,000
ACCOUNT NO. 002613507 Shawn H. Cantlin c/o United Services Auto Assoc PO Box 15506 Sacramento CA 95852		Debt arising from auto accident which debtors were involved.		x		\$1,000
ACCOUNT NO. Jose and Sahara Barron c/o Jaime Pena, Esq. 345 E Main St Ste 501 Stockton CA 95202		Debt arising from auto accident which debtors were involved.		x		\$2,000
ACCOUNT NO. 1999XC12235305 Orix Credit Alliance, Inc. 199 S Los Robles Ave Pasadena, CA 91107		Debt arising from delinquency on repossessed scaffolding scissor-lift equipment.		x		\$157,000

-6- continuation sheets attached

Subtotal → (Total of this page)	\$ 260,000
Total → (Use only on last page)	\$
(Report total also on Summary of Schedules)	

## SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CREDITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT		AMOUNT OF CLAIM
			UNLIQUIDATED	DISPUTED	
ACCOUNT NO. 9006-0030 Consol. Finance Group, Inc. PO Box 411605 Kansas City, MO 64141		Debt arising from personal injury indemnity claim.	x		\$1,000
ACCOUNT NO. 91260 Cook, Brown, Rediger & Prager 555 Capitol Mall Ste 425 Sacramento CA 95814		Debt arising from legal services rendered to debtors.	x		\$1,500
ACCOUNT NO. H-177711-2 Lori, Keily, Justin & Chaz Morales c/o Manuel Furtado, Esq 22274 Main Street Hayward CA 94541		Debt arising from auto accident which debtors were involved in.	x		\$100,000
ACCOUNT NO. H-161761-6 Melvin Kauffman c/o Normoyle & Newman 1700 Standiford Ave #A340 Modesto CA 95350		Debt arising from claim of property damage by debtors former landlord	x		\$10,000
ACCOUNT NO. 4741 Whitman & Feldstein, M.D. 27225 Calaroga Avenue Hayward CA 94545		Debt arising from medical services rendered to debtors.	x		\$350

Subtotal ➔ \$ 112,850  
(Total of this page)

Total ➔ \$  
(Use only on last page)

Sheet no. 1 of 6 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

(Report total also on Summary of Schedules)

### SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 49363 Eden Radiology Medical Group PO Box 5016 San Ramon, CA 94583		Debt arising from medical services received by debtors.		x		\$100
ACCOUNT NO. 6591136335 Allstate Insurance Company PO Box 2246 Brea, CA 92622		Debt arising from auto accident which debtors were involved in.		x		\$15,000
ACCOUNT NO. CK05502972 St. Paul Fire & Marine Insurance Company PO Box 10760 Phoenix, AZ 85064-0760		Debt arising from auto accident which debtors were involved in.		x		\$10,000
ACCOUNT NO. ACP21508585P Bay City Boiler & Engineering c/o Aetna PO Box 13716 Sacramento CA 95853		Debt arising from auto accident.		x		\$4,000
ACCOUNT NO. 085-0419-27185 GM Acceptance Corporation 2530 Arnold Drive Ste 300 Martinez CA 94553		Debt arising from a repossessed auto.		x		\$1,000

Sheet no. 2 of 6 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page)	\$ 30,100
Total (Use only on last page)	\$

(Report total also on Summary of Schedules)



**SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM			
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. 2780 Alameda County Dept. of Environmental Health 1131 Harbor Bay Parkway Alameda, CA 94502		Claim involving premises liability for damage to property.		x		\$1,000
ACCOUNT NO. D#246208 Eden Hospital c/o Suzanne Decker Esq. 1611 Telegraph Ave #1001 Oakland CA 94612		Debt arising from medical services received by debtors.		x		\$5,800
ACCOUNT NO. 4271-3827-1814-7388 Citibank Preferred PO Box 6100 The Lakes, NV 88901		Debt arising from accumulated charges for purchase of miscellaneous retail goods.		x		\$10,500
ACCOUNT NO. CK05502972 -04 Farwest Safety, Inc. c/o Audley & Audley 51 Tunnel Road Berkeley CA 94705		Debt arising from auto accident in which debtors were involved.		x		\$10,000
ACCOUNT NO. PO 627 Allergy Cons. Med. Group D.A. Fernandes, MD 20055 Lake Chabot Road Castro Valley CA 94546		Debt incurred from medical services received by debtors.		x		\$1,200
Subtotal → (Total of this page)						\$28,500
Total → (Use only on last page)						\$

**SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT			AMOUNT OF CLAIM
			UNLIQUIDATED	DISPUTED		
ACCOUNT NO. B780C93312936 Fireman's Fund Insurance Co. PO Box 808036 Petaluma, CA 94975		Debt arising from personal injury claim against debtors.		x		\$5,000
ACCOUNT NO. 3604440 Eden Hospital Medical Center 20103 Lake Chabot Road Castro Valley, CA 94546		Debt incurred from medical services rendered to debtors.		x		\$6,000
ACCOUNT NO. 726206 American Medical Response West PO Box 7780 Fremont, CA 94537		Debt incurred from medical services received by debtors.		x		\$900
ACCOUNT NO. 07252060 Regional Ambulance Inc c/o Bay Area Credit Service 2185 The Alameda Ste 1 San Jose CA 95126-1109		Debt incurred from medical services received by debtors.		x		\$700
ACCOUNT NO. 42713822718147388 Citicorp Credit Services, Inc. PO Box 5990 San Mateo, CA 94402		Debt arising from accumulated charges for purchase of miscellaneous retail goods		x		\$10,000
Subtotal (Total of this page)						\$ 22,600
Total (Use only on last page)						\$

**SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 503839 Patterson Lift Trucks, Inc. 975 Industrial Parkway W Hayward CA 94544		Debt arising from truck rental by debtors.		x		\$1,000
ACCOUNT NO. 32974 Trojan, Inc. 22 Loomis St San Francisco CA 94124		Debt arising from delinquent account involving purchase of charging equipment.		x		\$300
ACCOUNT NO. H-177711-2 Farwest Safety c/o Douglas Gooding, Esq. 535 Pacific Ave 2nd Fl San Francisco CA 94133		Debt arising from lawsuit pending involving auto accident which debtors were involved.		x		\$100,000
ACCOUNT NO. 098706 Carpenter's Health & Welfare Trust c/o M. Catherine Jones, Esq., 535 Pacific Ave, 2nd Fl, San Francisco, CA 94133		Debt arising for union trust fund payments owed by debtor.		x		\$20,000
ACCOUNT NO. H-177711-2 State of California c/o Daniel C. Murphy Esq. 595 Market St Ste 1700 San Francisco CA 94111		Debt arising from lawsuit filed in Alameda Superior Court regarding auto accident liability.		x		\$100,000

Sheet no. 5 of 6 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ➡ \$221,300  
(Total of this page)  
Total ➡ \$  
(Use only on last page)  
(Report total also on Summary of Schedules)

**SCHEDULE F—CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CREDITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 322218  Citicorp Credit Services c/o Pacific Coast Collections PO Box 23327 San Diego, CA 92123		Debt arising from accumulated credit charges incurred for purchase of miscellaneous retail goods.		x		\$10,000
ACCOUNT NO. 6591136335  Allstate Insurance Company c/o Bell Corp. of America PO Box 6460 Scottsdale, AZ 85261		Debt arising from auto accident which debtors were involved in.		x		\$15,000
ACCOUNT NO. 3604440  Eden Hospital c/o Credit Service of No. Ca. 1611 Telegraph Ave #1001 Oakland CA 94612		Debt arising from medical services received by debtors.		x		\$6,000
ACCOUNT NO. 322853  Eden Radiology Medical Group c/o AMA Collection Services PO Box 579 San Leandro, CA 94577		Debt arising from medical services received by debtors.		x		\$400
ACCOUNT NO.						

Subtotal → \$ 31,400  
(Total of this page)  
Total → \$ 706,750  
(Use only on last page)  
(Report total also on Summary of Schedules)