STATEMENT AS TO CREDITORS

(SECURED AND UNSECURED)

Rev. Code 2329.70

Lorain Municipal Court,
Lorain, Ohio

_____
_____
Address
_____

No. _____

The following is a full, accurate and complete statement to the date of filing hereof of the names of the secured and unsecured creditors of the undersigned with liquidated claims, their addresses, and amount due and owing to each;

NAMES	ADDRESS	[1]SECURITY	Amount Due and Owing

1. Indicate type of Security as to secured creditors.

NAMES	ADDRESS	[1]SECURITY	Amount Due and Owing

The State of Ohio,_____ County, ss.

The undersigned being duly sworn says that the foregoing statement is full, accurate and complete.

_____

Sworn to before me and signed in my presence, this

_____day of _____ 19_____

_____

_____

STATEMENT AS TO CREDITORS

In Attachment

Filed with Application for Appointment of Trustee

_____, 20____

TED KALO, CLERK

By _____ Deputy