

B 6 Summary (Official Form 6 - Summary) (12/13)

**United States Bankruptcy Court**  
**Southern District of Indiana**

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,  
 Debtor

Case No. **14-07997-JKC-11**Chapter **11**

**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 of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>3,009,900.00</b>		
B - Personal Property	<b>Yes</b>	<b>3</b>	<b>251,680.00</b>		
C - Property Claimed as Exempt	<b>No</b>	<b>0</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>194,477.33</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>2</b>		<b>4,000.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>15</b>		<b>302,175.40</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>No</b>	<b>0</b>			<b>N/A</b>
J - Current Expenditures of Individual Debtor(s)	<b>No</b>	<b>0</b>			<b>N/A</b>
Total Number of Sheets of ALL Schedules		<b>24</b>			
Total Assets			<b>3,261,580.00</b>		
Total Liabilities				<b>500,652.73</b>	

**United States Bankruptcy Court**  
**Southern District of Indiana**

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,  
 Debtor

Case No. **14-07997-JKC-11**

Chapter **11**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

**State the following:**

Average Income (from Schedule I, Line 12)	
Average Expenses (from Schedule J, Line 22)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20 )	

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		
4. Total from Schedule F		
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		

B6A (Official Form 6A) (12/07)

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
2640 Cold Spring Road Indianapolis, IN 46222 Nursing home facility (value from 2014 property tax assessment) Land is owned by Indianapolis Foundation, Inc.		-	3,009,900.00	194,477.33

Sub-Total > **3,009,900.00** (Total of this page)Total > **3,009,900.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Patients Funds account #0694</b> <b>General Account #9310</b>	-	<b>2,900.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > **2,900.00**  
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.Case No. 14-07997-JKC-11

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.		<b>EDS Payment - monthly (ongoing) CMS Payment - billing (ongoing)</b>	-	<b>Unknown</b>
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			

Sub-Total > **0.00**  
(Total of this page)

Sheet 1 of 2 continuation sheets attached  
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	<b>X</b>			
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.		<b>See attached "INVENTORY LIST"</b> <b>Location: 2640 Cold Spring Road, Indianapolis IN 46222</b>	-	<b>248,780.00</b>
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			

Sub-Total > **248,780.00**  
(Total of this page)

Total > **251,680.00**

(Report also on Summary of Schedules)

Sheet **2** of **2** continuation sheets attached  
to the Schedule of Personal Property

B6D (Official Form 6D) (12/07)

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests 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 a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). 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 the 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.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ 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, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxx3006			<b>Mortgage</b> <b>2640 Cold Spring Road</b> <b>Indianapolis, IN 46222</b> <b>Nursing home facility</b> <b>(value from 2014 property tax</b> <b>assessment)</b> <b>Land is owned by Indianapolis</b> <b>Foundation, Inc.</b>					
JPMorgan Chase Bank PO Box 6026 Chicago, IL 60680-6026		-	Value \$ 3,009,900.00				194,477.33	0.00
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)							194,477.33	0.00
Total (Report on Summary of Schedules)							194,477.33	0.00

0 continuation sheets attached

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

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

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



B6E (Official Form 6E) (4/13) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet)

**Taxes and Certain Other Debts  
Owed to Governmental Units**

## TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									AMOUNT ENTITLED TO PRIORITY
Account No.				<b>2013</b>					
<b>Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346</b>				<b>Federal taxes</b>					<b>0.00</b>
								<b>4,000.00</b>	<b>4,000.00</b>
Account No.									
Account No.									
Account No.									
Account No.									
Account No.									
Subtotal									<b>0.00</b>
(Total of this page)								<b>4,000.00</b>	<b>4,000.00</b>
Total									<b>0.00</b>
(Report on Summary of Schedules)								<b>4,000.00</b>	<b>4,000.00</b>

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, 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. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). 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 the 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 and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.  <b>Accelerated Care Plus Leasing Inc. 4850 Toule St, Ste 41 Reno, NV 89502</b>		-					<b>Unknown</b>
Account No.  <b>Accessible Staffing PO Box 13188 Milwaukee, WI 53213</b>		-					<b>562.50</b>
Account No.  <b>Accumed PO Box 641836 Cincinnati, OH 45264</b>		-					<b>105.00</b>
Account No.  <b>All Med 8199 Zionville Road Indianapolis, IN 46268</b>		-					<b>23,208.50</b>
Subtotal (Total of this page)							<b>23,876.00</b>

14 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Allegra Long Printing Service Inc</b> <b>7802 East 88th Street</b> <b>Indianapolis, IN 46256</b>	-					<b>Unknown</b>
Account No.						
<b>Allen Herring</b> <b>6019 Brookshire Drive</b> <b>Pittsboro, IN 46167</b>	-					<b>Unknown</b>
Account No.						
<b>Allscripts</b> <b>8529 Six Forks Road</b> <b>Raleigh, NC 27615</b>	-					<b>3,491.74</b>
Account No.						
<b>American United Life Insurance Co.</b> <b>Attn: Acct Control</b> <b>5761 Reliable Parkway</b> <b>Chicago, IL 60686</b>	-					<b>979.29</b>
Account No.						
<b>Aqua Systems</b> <b>7785 East US Highway 36</b> <b>Avon, IN 46123</b>	-					<b>Unknown</b>
Sheet no. <u>1</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>4,471.03</b>

Debtor

[illegible]

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Blue</b> <b>One American Square</b> <b>Suite 2200, Box 82062</b> <b>Indianapolis, IN 46282</b>	-					<b>68,605.52</b>
Account No.						
<b>Bright House</b> <b>PO Box 30262</b> <b>Tampa, FL 33630</b>	-					<b>188.00</b>
Account No.						
<b>Canon Solutions America</b> <b>300 Commerce Square Blvd</b> <b>Burlington, NJ 08016</b>	-					<b>97.85</b>
Account No.						
<b>Cassidy Turley</b> <b>10 W Market St, Ste 1120</b> <b>Indianapolis, IN 46204</b>	-					<b>Unknown</b>
Account No.						
<b>Citizen Energy Group</b> <b>PO Box 7056</b> <b>Indianapolis, IN 46207</b>	-					<b>7,000.00</b>
Sheet no. <u>3</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>75,891.37</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Citizens Water</b> <b>PO Box 1990</b> <b>Indianapolis, IN 46206</b>	-					<b>Unknown</b>
Account No.						
<b>Clia Laboratory Program</b> <b>PO Box 530882</b> <b>Atlanta, GA 30353</b>	-					<b>Unknown</b>
Account No.						
<b>Courtney &amp; Associates</b> <b>3530 N Keystone Ave</b> <b>Indianapolis, IN 46227</b>	-					<b>Unknown</b>
Account No.						
<b>Courtney &amp; Associates LLC</b> <b>3530 S Keystone Avenue</b> <b>Indianapolis, IN 46227</b>	-					<b>Unknown</b>
Account No.						
<b>Donald R. Hodson Distributing</b> <b>PO Box 24672</b> <b>Indianapolis, IN 46224</b>	-					<b>Unknown</b>
Sheet no. <u>4</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Eco Lab</b> <b>PO Box 70343</b> <b>Chicago, IL 60673</b>	-					<b>Unknown</b>
Account No.						
<b>Facilities Management LLC</b> <b>8505 Zionville Road</b> <b>Indianapolis, IN 46268</b>	-					<b>Unknown</b>
Account No.						
<b>Financial Care of the Wabash Valley</b> <b>7669 S Monticello St</b> <b>Terre Haute, IN 47802</b>	-					<b>Unknown</b>
Account No.						
<b>Financial Management Resources Inc</b> <b>11805 N Pennsylvania St</b> <b>Carmel, IN 46032</b>	-					<b>Unknown</b>
Account No.						
<b>George R Hallal</b> <b>3225 Winfield</b> <b>Indianapolis, IN 46222</b>	-					<b>Unknown</b>
Sheet no. <b>5</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>0.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Gordon Food Service</b> <b>PO Box 1787</b> <b>Grand Rapids, MI 49501</b>	-					<b>Unknown</b>
Account No.						
<b>Grace Refrigeration</b> <b>PO Box 606</b> <b>Zionsville, IN 46077</b>	-					<b>Unknown</b>
Account No.						
<b>Greenwood Medical Laboratory</b> <b>622 N Madison Ave</b> <b>Greenwood, IN 46142</b>	-					<b>612.18</b>
Account No.						
<b>Harmon &amp; Hanlon Ltd</b> <b>2737 E 56th St, Ste B</b> <b>PO Box 20823</b> <b>Indianapolis, IN 46220</b>	-					<b>Unknown</b>
Account No.						
<b>Hornings Inc.</b> <b>176 West 28th Street</b> <b>PO Box 88416</b> <b>Indianapolis, IN 46205</b>	-					<b>Unknown</b>
Sheet no. <b>6</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page)
						<b>612.18</b>



B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>HPS</b> <b>3275 M-37 Highway</b> <b>PO Box 247</b> <b>Middleville, MI 49333</b>		-				<b>416.00</b>
Account No.						
<b>HTS Therapy</b> <b>1411 W County Line Road, Suite A</b> <b>Greenwood, IN 46142</b>		-				<b>4,220.00</b>
Account No.						
<b>Humana Comp Benefits</b> <b>PO Box 219051</b> <b>Kansas City, MO 64121</b>		-				<b>Unknown</b>
Account No.						
<b>Indianapolis Power and Light</b> <b>P.O. Box 110</b> <b>Indianapolis, IN 46206</b>		-				<b>10,000.00</b>
Account No.						
<b>Indianapolis Star</b> <b>307 N Pennsylvania St</b> <b>Indianapolis, IN 46206</b>		-				<b>Unknown</b>
Sheet no. <u>7</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>14,636.00</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>IU Health</b> <b>250 N Shadeland</b> <b>Indianapolis, IN 46219</b>	-					<b>Unknown</b>
Account No.						
<b>IU Health Occupational</b> <b>4850 W Century Plaza Rd, Ste 140</b> <b>Indianapolis, IN 46254</b>	-					<b>Unknown</b>
Account No.						
<b>Leading Age</b> <b>PO Box 68829</b> <b>Indianapolis, IN 46268</b>	-					<b>Unknown</b>
Account No.						
<b>Living Design Inc</b> <b>47015 SD Highway 44</b> <b>Worthing, SD 57077</b>	-					<b>1,486.95</b>
Account No.						
<b>Med Pass Inc.</b> <b>L 3495</b> <b>Columbus, OH 43260</b>	-					<b>735.74</b>
Sheet no. <u>8</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>2,222.69</b>

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.							
<b>Midwest Radiology</b> <b>PO Box 56046</b> <b>Indianapolis, IN 46250</b>	-						<b>Unknown</b>
Account No. <b>xx5433</b>							
<b>Oce Imagistics Inc</b> <b>7555 E Hampden Ave</b> <b>Suite 200</b> <b>Denver, CO 80231</b>	-						<b>Unknown</b>
Account No.							
<b>Office Max Incorporated</b> <b>75 Remittance Drive #2698</b> <b>Chicago, IL 60675</b>	-						<b>Unknown</b>
Account No. <b>xx0234</b>							
<b>Olympic</b> <b>2825 N Arlington Ave</b> <b>Indianapolis, IN 46218</b>	-						<b>4,319.18</b>
Account No.							
<b>Oscar Telecom Inc</b> <b>802 N Grant Ave</b> <b>Indianapolis, IN 46201</b>	-						<b>Unknown</b>
Sheet no. <u>9</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>4,319.18</b>

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Otis Spunkmeger Aryzta LLC</b> <b>7090 Collections</b> <b>Chicago, IL 60693</b>	-					<b>Unknown</b>
Account No.						
<b>Peers &amp; Associates</b> <b>19041 Northbrook Circle</b> <b>Westfield, IN 46074</b>	-					<b>Unknown</b>
Account No. <b>xxxxxxx7870</b>						
<b>Pitney Bowes Purchase Power</b> <b>PO Box 37184</b> <b>Pittsburgh, PA 15250</b>	-					<b>2,159.73</b>
Account No.						
<b>Point Click Care Wescom Solutions</b> <b>Inc</b> <b>300 Techne Center Drive, Ste A</b> <b>Milford, OH 45150</b>	-					<b>1,800.00</b>
Account No. <b>xx2251</b>						
<b>Premium Assignment</b> <b>PO Box 8000</b> <b>Tallahassee, FL 32314</b>	-					<b>2,600.00</b>
Sheet no. <u>10</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>6,559.73</b>

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xx8407</b>						
<b>Rays Trash</b> <b>PO Box 1</b> <b>Clayton, IN 46118</b>	-					<b>2,930.92</b>
Account No.						
<b>RCS</b> <b>3112 Solution Center</b> <b>Chicago, IL 60677</b>	-					<b>Unknown</b>
Account No.						
<b>Reed's Home Service Landscaping</b> <b>3415 Periwinkle Way</b> <b>Indianapolis, IN 46220</b>	-					<b>Unknown</b>
Account No.						
<b>Republic Services</b> <b>832 Laugdate Avenue</b> <b>Indianapolis, IN 46202</b>	-					<b>Unknown</b>
Account No.						
<b>RFS Group</b> <b>PO Box 55281</b> <b>Indianapolis, IN 46205</b>	-					<b>203.38</b>
Sheet no. <u>11</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>3,134.30</b>

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>xxxx9900</b>						
<b>Ricoh Usa, Inc.</b> <b>Bldg A, Bldg B Mailroom</b> <b>810-820 Gears Road</b> <b>Houston, TX 77067</b>	-					<b>1,302.54</b>
Account No. <b>xxxx-x8607</b>						
<b>Riley Bennett &amp; Egloff LLP</b> <b>Attorneys at Law</b> <b>141 E Washington St, Fourth Floor</b> <b>Indianapolis, IN 46204</b>	-					<b>Unknown</b>
Account No.						
<b>Safe Care</b> <b>749 S Grant</b> <b>Indianapolis, IN 46203</b>	-					<b>Unknown</b>
Account No.						
<b>Seneca Medical</b> <b>500 Industrial Park Dr</b> <b>Shelbyville, IN 46176</b>	-					<b>20,935.42</b>
Account No.						
<b>SMS Specialized Medical Services</b> <b>3112 Solution Center</b> <b>Chicago, IL 60677</b>	-					<b>37,597.29</b>
Sheet no. <u>12</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>59,835.25</b>

B6F (Official Form 6F) (12/07) - Cont.

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>Stericycle</b> <b>4010 Commercial Avenue</b> <b>Northbrook, IL 60062</b>	-					<b>539.00</b>
Account No.						
<b>Super Laundry Equipment Corp</b> <b>dba Laundry City Equipment</b> <b>2450 N. Shadland</b> <b>Indianapolis, IN 46219</b>	-					<b>7,000.00</b>
Account No.						
<b>Sysco</b> <b>4000 W 62nd St</b> <b>Indianapolis, IN 46268</b>	-					<b>95,249.15</b>
Account No.						
<b>Terminix</b> <b>PO Box 17167</b> <b>Memphis, TN 38187</b>	-					<b>Unknown</b>
Account No.						
<b>The Uniform House</b> <b>1927 N Capital Ave</b> <b>Indianapolis, IN 46202</b>	-					<b>2,919.91</b>
Sheet no. <u>13</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>105,708.06</b>

B6F (Official Form 6F) (12/07) - Cont.

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**,Case No. **14-07997-JKC-11**

Debtor

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>xx5703</b>						
<b>Unifirst Corporation</b> <b>4201 Industrial Blvd</b> <b>Indianapolis, IN 46254</b>	-					<b>106.61</b>
Account No.						
<b>Unum Life Insurance Company of America</b> <b>PO Box 409548</b> <b>Atlanta, GA 30384</b>	-					<b>Unknown</b>
Account No.						
<b>Verizon Wireless</b> <b>PO Box 4002</b> <b>Acworth, GA 30101</b>	-					<b>Unknown</b>
Account No.						
<b>VGM Financial Services</b> <b>1111 W San Marnan Dr</b> <b>Waterloo, IA 50701</b>	-					<b>Unknown</b>
Account No.						
Sheet no. <b>14</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page)
						<b>106.61</b>
						<b>Total</b> (Report on Summary of Schedules)
						<b>302,175.40</b>



B6G (Official Form 6G) (12/07)

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.Case No. 14-07997-JKC-11

Debtor

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

0

continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

B6H (Official Form 6H) (12/07)

In re Alpha Home Association of Greater Indianapolis (Indiana) Inc.,Case No. 14-07997-JKC-11

Debtor

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

B6 Declaration (Official Form 6 - Declaration). (12/07)

**United States Bankruptcy Court  
Southern District of Indiana**

In re **Alpha Home Association of Greater Indianapolis (Indiana) Inc.**  
Debtor(s)

Case No. **14-07997-JKC-11**  
Chapter **11**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **26** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **September 25, 2014**

Signature **/s/ Jamell Burks-Craig**  
**Jamell Burks-Craig**  
**President**

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.