Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
District of Oregon	
Case number (If known):	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Geoffrey	
	government-issued picture identification (for example,	First name	First name
	your driver's license or	Edward	
	passport).	Middle name	Middle name
		Hammond	
	Bring your picture identification to your meeting	Last name	Last name
	with the trustee.	III	
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Jeffrey First name Edward	First name
	Include your married or	Middle name	Middle name
	maiden names and any	Mandalis	Middle name
	assumed, trade names and		Lost name
	doing business as names.	Last name	Last name
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx -	xxx - xx -

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.	EIN	 EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		3362 SW FAIRMOUNT BLVD			
		Number Street	 Number Street		
		PORTLAND OR 97239	 		
		City State ZIP Code	 City State ZIP Code		
		MULTNOMAH-OR	 		
		County	County		
		If your mailing address is different from the above, fill it in here. Note that the court will se any notices to you at this mailing address.  Number Street	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number Street		
		Number Street	Number Street		
		P.O. Box	 P.O. Box		
		City State ZIP Code	 City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this pe I have lived in this district longer than in ar other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor

1	Geoffrey	Edward	Hammond	III	Case number (if known)	
	First Name	Middle Name	Last Name			

Ρ	art 2: Tell the Court Abo	out Your I	3ankrupt	tcy Case		
7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bankı Cha Cha Cha		orief description of each, see <i>Notice</i> m 2010)). Also, go to the top of pag		J.S.C. § 342(b) for Individuals Filing e appropriate box.
8.	How you will pay the fee	loca your subr with I ne App I rec By I less pay	I court for rself, you mitting yo a pre-primed to pay lication for quest that aw, a judy than 150 the fee in	r more details about how you may pay with cash, cashier's chour payment on your behalf, you nted address.  y the fee in installments. If you or Individuals to Pay The Filing In the may fee be waived (You may ge may, but is not required to, wo of the official poverty line that	ay pay. Typicall heck, or money in attorney may put choose this operate in Installme request this optivative your fee, at applies to you is option, you m	order. If your attorney is boay with a credit card or check stion, sign and attach the strong of the
9.	Have you filed for bankruptcy within the last 8 years?	No. Yes.	District _	When	MM / DD / YYYY	Case Number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No. Yes.	Debtor District	When		Relationship to you  Case Number, if known
11.	Do you rent your residence?	No. Yes.	No	r landlord obtained an eviction judgr No. Go to line 12		nt Against You (Form 101A) and file it as

#### Part 3:

#### Report About Any Businesses You Own as a Sole Proprietor

# 12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Aequatium LLC

Name of business, if any

111 SW 5TH 3150

Number Street

Portland

City

97204

State ZIP Code

OR

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

None of the above

Aequantium Research LLC

Name of business, if any

111 SW 5TH 3150

Number Street

Portland OR 97204
City State ZIP Code

# 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor* or a debtor as defined by 11 U.S.C.§ 1182(1)?

For a definition of *small* business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
- No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
- Yes. I am filing under Chapter 11, I am a debtor according to the definition § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

 Debtor 1
 Geoffrey
 Edward
 Hammond
 III
 Case number (*if known*)

 First Name
 Middle Name
 Last Name

Part 4:	Report if You Own o	r Have I	Any Hazardous Property	or Any P	roperty That	t Needs Imm	nediate	Attention	
prope allege of imn identii public Or do prope	u own or have any rty that poses or is d to pose a threat ninent and fiable hazard to health or safety? you own any rty that needs diate attention?	No. Yes.	What is the hazard?  If immediate attention is needed, why is it needed?  Where is the property?	Number	Street				_
perisha that mu	ample, do you own able goods, or livestock ust be fed, or a building eds urgent repairs?			City			State	ZIP Code	

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes meincapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes meincapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### Part 6: Answer These Questions for Reporting Purposes

16.	What kind of debts	do
	vou have?	

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.

Yes. Go to line 17

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c

Yes. Go to line 17

16c. State the type of debts you owe that are not consumer debts or business debts.

# 17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? No. I am not filing under Chapter 7. Go to line 18

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No

Yes

18.	How many creditors do
	you estimate that you
	owe?

1-49	
50-99	
100-199	
200-999	

\$0-\$50,000

1,000-5,000	
5,001-10,000	
10,001-25,000	

50,001-100,000 More than 100,000

25,001-50,000

# 19. How much do you estimate your assets to be worth?

\$50,001-\$100,000
\$100,001-\$500,000
\$500,001-\$1 million

\$10,000,001-\$50 million
\$50,000,001-\$100 million
\$100,000,001-\$500 million

\$1,000,001-\$10 million

\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

\$500,000,001-\$1 billion

# 20. How much do you estimate your liabilities to be?

\$0-\$50,000
\$50,001-\$100,000
\$100,001-\$500,000
\$500,001-\$1 million

\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million

\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

#### Part 7:

Sign Below

#### For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 1	

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

Signature or Debtor

Executed on 05/08/2023

MM / DD / YYYY

Debtor 1	Geoffrey	Edward	Hammond	Ш	Case number (if known)
	First Name	Middle Name	Last Name		

For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petit to proceed under Chapter 7, 11, 12, or 13 of title available under each chapter for which the person the notice required by 11 U.S.C. § 342(b) and, in knowledge after an inquiry that the information in	11, United States Code, and n is eligible. I also certify tha a case in which § 707(b)(4)(	have explained the relief t I have delivered to the debtor(s) D) applies, certify that I have no
	X	Date	
		Date	
	Signature of Attorney for Debtor		MM / DD / YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	Bar number	State	

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

No

Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

No

Yes. Name of Person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X		X	
Signature of D	Pebtor 1	Signature of Deb	otor 2
Date	05/08/2023 MM / DD / YYYY	Date	MM / DD / YYYY
Contact phone	503-839-9276	Contact phone	
Cell phone	503-839-9276	Cell phone	
Email address	g3hammond@gmail.com	Email address	

Debtor 1	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: District of Ore	gon	

# Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
er penalty of perjury, I declare that I	have read the summary and schedules filed with this declaration and
er penalty of perjury, I declare that I they are true and correct.	have read the summary and schedules filed with this declaration and
	have read the summary and schedules filed with this declaration and

	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	

#### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information 12

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Ρ	art 1: Summarize Your Assets		
		Your ass	ets what you own
1.	Schedule A/B: Property (Official Form 106A/B)		
	1a. Copy line 55, Total real estate, from Schedule A/B	. \$	890000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$	99000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	989000.00
Ρ	art 2: Summarize Your Liabilities		
		Your liab Amount y	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	781586.14
١.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. \$	
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	. + \$	34704.59
	Your total liabilities	\$	816290.73
P	art 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I)		
	Copy your combined monthly income from line 12 of Schedule I	. \$	0.00
5.	Schedule J: Your Expenses (Official Form 106J)		

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

#### Part 4: Answer These Questions for Administrative and Statistical Records

#### 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

#### 7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income:* Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$		

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00

Fill in this information to identify your case:						
Debtor 1	Geoffrey	Edward	Hammond	≡		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)						
	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of Oregon						
Case number (If known)			_			

Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1	Describe Eac	h Resid	lence, Buildi	ng, Land, or Other Real Estate You Own or I	lave an Interest In		
1. <b>Do</b> y	ou own or have any	legal o	r equitable into	erest in any residence, building, land, or similar pr	operty?		
	No. Go to Part 2.						
,	Yes. Where is the prope	rty?					
1.1	3362 SW FAIRMOUNT BLVD Street address, if available, or other description			What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property? portion you own?		
	PORTLAND	OR	97239	Manufactured or mobile home	, . ,		
	City	State	ZIP Code	Land Investment property	\$ 890000.00 \$ 890000.00		
	MULTNOMAH-OR			Timeshare	Describe the nature of your ownership		
	County			Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
				Who has an interest in the property? Check one.  Debtor 1 only	FEE SIMPLE		
				Debtor 2 only  Debtor 1 and Debtor 2 only	Check if this is community property (see instructions)		
				At least one of the debtors and another	(ccc medicalens)		
				Other information you wish to add about this item such as local property identification number:	_		
				or all of your entries from Part 1, including any entrer here.			
Part 2	Describe You	r Vehic	eles				
				erest in any vehicles, whether they are registered on hicle, also report it on Schedule G: Executory Contract			
3. Cars	s, vans, trucks, tract	ors, spo	ort utility vehic	eles, motorcycles			
	No						
,	Yes						

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

3.1	Make: Model Year: Approximate mileage: Other information:	Mercedes GLA250 2020 11000	Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clar Current value of the entire property?  \$ 24000.00	ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
Exam N	ples: Boats, trailers, mo	,	d other recreational vehicles, other vehicles, and acce tercraft, fishing vessels, snowmobiles, motorcycle accesso		
	Make: Model		Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Year: Other information:			Current value of the entire property?	Current value of the portion you own?
			Check if this is community property (see instructions)	\$	\$
I .			for all of your entries from Part 2, including any entrients there.	es for pages	24000.00

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

ш	Part St Describe Your Personal and Household Items						
De	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.					
6.	Household goods and furnishings						
	Examples: Major appliances, furniture, linens, china, kitchenware  No						
	Yes. Describe Furniture	\$500	000.00				
7.	Electronics						
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games						
	No Yes. Describe Laptop, two televisions, phones	\$10	000.00				
8.	Collectibles of value						
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No						
	Yes. Describe Coins	\$20	000.00				
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments  No  Yes. Describe	\$					
10.	Firearms						
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No						
	Yes. Describe 4 firearms	\$30	000.00				
11.	. Clothes						
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No						
	Yes. Describe Clothes	\$100	00.00				
12.	. <b>Jewelry</b> Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver						
	No Yes. Describe jewelry	\$	000.00				
	<u> </u>	-					

Debtor 1	Geoffrey	Edward	Hammond	Ш	Case number (if known)
	First Name	Middle Name	Last Name		

13. Non-farm animals  Examples: Dogs, cats, birds	, horses	
No		
Yes. Describe		\$
14. Any other personal and ho No Yes. Give specific information	ousehold items you did not already list, including any health aids you did not list	\$
	of your entries from Part 3, including any entries for pages you have attached	

Part 4:	Describe	Your	<b>Financial</b>	Assets

Do	you own or have any le	gal or eq	uitable interest in a	ny of the following?		Current value portion you Do not deduct or exemptions.	own? secured claims
16.	No	-		e, in a safe deposit box, and on hand when you fi	le your petition	\$	
17.	Deposits of money						
	Examples: Checking, say			nts; certificates of deposit; shares in credit unions ultiple accounts with the same institution, list each		<b>;</b> ,	
	No						
	Yes			Institution name:			
		17.1	Checking account:	Citibank NA		\$	3000.00
18. Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No  Yes							
		Chase	hase				4000.00
19.	Non-publicly traded sto an LLC, partnership, an No Yes. Give specific information about them	d joint ve	enture	ated and unincorporated businesses, includin	g an interest in % of ownership:100 %	\$	0.00
		Aequant	tium Research LLC		100 %	\$	0.00
		Aequant	tium Volatility Arbitra	ge Fund LP	100 %	\$	0.00
20.	Negotiable instruments in	nclude per nts are the	rsonal checks, cashio ose you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them.			
	uiciii	10000 Ha				\$	
						Ψ	
21.	Retirement or pension a	accounts					
	No Yes. List each			3(b), thrift savings accounts, or other pension or p	rofit-sharing plans		
	account separately.	Type of a	iccount:	Institution name:			

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

			\$
22.	Security deposits and prepayments		
	Your share of all unused deposits you have made so that you resumples: Agreements with landlords, prepaid rent, public utilic companies, or others		
	No		
	YesInstitut	tion name or individual:	
			\$
23.	Annuities (A contract for a periodic payment of money to you,	either for life or for a number of years)	
	No		
	Yes Issuer name and description:		
			\$
24.	Interests in an education IRA, in an account in a qualified a 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ABLE program, or under a qualified state tuition program.	
	No		
	Yes Institution name and description. Separat	ely file the records of any interests.11 U.S.C. § 521(c):	
			\$
25.	Trusts, equitable or future interests in property (other than exercisable for your benefit	n anything listed in line 1), and rights or powers	
	No		
	Yes. Give specific information about them		\$
26.	Patents, copyrights, trademarks, trade secrets, and other i	intellectual property	
	Examples: Internet domain names, websites, proceeds from re	oyalties and licensing agreements	
	No		
	Yes. Give specific		\$
	information about them		
27.	Licenses, franchises, and other general intangibles		
	Examples: Building permits, exclusive licenses, cooperative as	ssociation holdings, liquor licenses, professional licenses	
	No		
	Yes. Give specific information about them		\$
Mc	ney or property owed to you?		Current value of the portion you own? Do not deduct secured
			claims or exemptions.

ebtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)	
	First Name	Middle Name	Last Name			

28.	Tax refunds owed to you		
	No		
	Yes. Give specific information	Federal:	\$
	about them, including whether you already filed the returns	State:	\$
	and the tax years	Local:	\$
29.	Family support  Examples: Past due or lump sum alimony, spousal support, child support, m	paintanance, divarce cattlement, property cattlen	nont
	No	iaintenance, divorce settlement, property settlen	nent
	Yes. Give specific information	Alimony:	\$
		Maintenance:	
		Support	\$
		Divorce Settlement:	\$
			\$
		Property Settlement:	\$
30.	Other amounts someone owes you		
	Examples: Unpaid wages, disability insurance payments, disability benefits, Social Security benefits; unpaid loans you made to someone else	sick pay, vacation pay, workers' compensation,	
	No	<del>5</del>	
	Yes. Give specific information		\$
31	Interests in insurance policies		
01.	Examples: Health, disability, or life insurance; health savings account (HSA)	): credit. homeowner's, or renter's insurance	
	No	,, , , , , , , , , , , , , , , , , , , ,	
	Yes. Name the insurance company		
	of each policy and list its value Company name:	Beneficiary:	
			\$
32	Any interest in property that is due you from someone who has died		
JZ.	If you are the beneficiary of a living trust, expect proceeds from a life insuran	ice policy or are currently entitled to receive	
	property because someone has died.	iso policy, or allo called any challed to receive	
	No		
	Yes. Give specific information		\$
33.	Claims against third parties, whether or not you have filed a lawsuit or		
	Examples: Accidents, employment disputes, insurance claims, or rights to st	ue	
	No		¢
	Yes. Give specific information		\$
34.	Other contingent and unliquidated claims of every nature, including conto set off claims	unterclaims of the debtor and rights	
	No		
	Yes. Give specific information		\$

ebtor 1	Geoffrey	Edward	Hammond	Ш	Case number (if known)
	First Name	Middle Name	Last Name		

35. Any financial assets you did not already	list		
No			
Yes. Give specific information		\$	
	s from Part 4, including any entries for pages you have attached	s	7000.00
	•		

ebtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)	
	First Name	Middle Name	Last Name			

Pa	Describe A	ny Business-Related Property You Own or Have an Interest	t In. List any	real estate in Part 1.
37.	Do you own or have ar	y legal or equitable interest in any business-related property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable o	r commissions you already earned		
	No			
	Yes. Describe			<b>7</b> \$
39.	Office equipment, furn	ishings, and supplies		
		d computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks,	chairs, electronic de	evices
	No			
	Yes. Describe			T \$
	res. Describe			
40.	Machinery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
	No			
	Yes. Describe			\$
41.	Inventory			
	No			
	Yes. Describe			\$
42	Interests in partnership	os or joint ventures		
	No			
	Yes. Describe	Name of entity:	% of ownership:	
	res. Describe	Name of entity.	•	
			0 %	\$
13	Customor lists mailing	lists, or other compilations		
40.	No	insis, or other compliations		
		natural maragnathy identifiable information (so defined in 11 LLC C \$ 101/41	۸۱۱۵	
	-	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41	A)) <b>?</b>	
	No			1
	Yes. Descr	ibe		\$
44.	Any business-related p	property you did not already list		
	No			
	Yes. Give specific			
	information			
				\$
45.	Add the dollar value of	all of your entries from Part 5, including any entries for pages you have a	ittached	
		imber here		\$0.00

Debtor 1 Geoffrey Edward Hammond III Case number (if known)		
---	--	--

Pa	Part 6: If you own or have an interest in farmland, list it in Part 1.	operty rou own or have an interest in.
46.	46. Do you own or have any legal or equitable interest in any farm- or comn	nercial fishing-related property?
	No. Go to Part 7.	
	Yes. Go to line 47.	
		Current value of the portion you own?  Do not deduct secured claims or exemptions.
47.	47. Farm animals	
	Examples: Livestock, poultry, farm-raised fish	
	No	
	Yes	\$
48.	48. Crops—either growing or harvested	
	No	
	Yes. Give specific information	\$
49.	49. Farm and fishing equipment, implements, machinery, fixtures, and tools	of trade
	No	
	Yes	\$
50.	50. Farm and fishing supplies, chemicals, and feed	
	No	<b>\$</b>
	Yes	
51.	51. Any farm- and commercial fishing-related property you did not already l	ist
	No	
	Yes. Give specific information	\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

Pa	Describe All Property You Own or Hav	e an	interest in I nat	You Did Not List Above		
53.	Do you have other property of any kind you did not alreat Examples: Season tickets, country club membership No Yes. Give specific information	ady list	1?		\$_	
54.	Add the dollar value of all of your entries from Part 7. W	rite tha	at number here		\$_	0.00
Pa	List the Totals of Each Part of this Fo	rm				
55.	Part 1: Total real estate, line 2			······	\$_	890000.00
56.	Part 2: Total vehicles, line 5	\$	24000.00			
57.	Part 3: Total personal and household items, line 15	\$	68000.00			
58.	Part 4: Total financial assets, line 36	\$_	7000.00			
59.	Part 5: Total business-related property, line 45	\$	0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$				
61.	Part 7: Total other property not listed, line 54	+\$_	0.00			
62.	Total personal property. Add lines 56 through 61	\$_	99000.00	Copy personal property total 👈	+\$_	99000.00
63.	Total of all property on Schedule A/B. Add line 55 + line 6	2			\$_	989000.00

Debtor 1	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court f	for the: District of Ore	gon	

**Identify the Property You Claim as Exempt** 

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

Check if this is an amended filing

#### Official Form 106C

Part 1:

# Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

2	You are claiming state and federal nonbar You are claiming federal exemptions. 11 U For any property you list on <i>Schedule A/B</i> th	J.S.C. § 522(b)(2)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own?  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	\$	\$100% of fair market value, up to any applicable statutory limit	

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes

t Name	Middle Name		
	Middle Name	Last Name	
t Name	Middle Name	Last Name	
t	Name	Name Middle Name	

#### Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

for	r each claim. If more than one creditor has	ore than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Ame Do r	ount of claim not deduct the e of collateral.	Column B Value of collat that supports claim		Column Unsect portion If any	ured
1	BSI FINANCIAL	Describe the property that secures the claim:	\$	757000.00	\$ 89000	0.00	\$	0.0
	Creditor's Name PO BOX 517 Number Street	3362 SW FAIRMOUNT BLVD SINGLE FAMILY RESIDENCE	· —					
	Number Street	As of the date you file, the claim is: Check all that apply.						
	TITUSVILLE PA 16354 City State ZIP Code	Contingent  Unliquidated  Disputed						
	Who owes the debt? Check one.	Nature of lien. Check all that apply.						
	Debtor 1 only  Debtor 2 only	An agreement you made (such as mortgage or secured car loan)						
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)						
	At least one of the debtors and another  Check if this claim is for a  community debt	Judgment lien from a lawsuit Other (including a right to offset)						
	Date debt was incurred 08/16/2022	Last 4 digits of account number						
2	Mercedes Benz Financial	Describe the property that secures the claim:	\$	24586.14	\$ 2458	6.14	\$	
	Creditor's Name PO BOX 5209	MERCEDES GLA250	_		·		·	
	Number Street	As of the date you file, the claim is: Check all that apply.						
	Carol Stream IL 60197	Contingent Unliquidated						
	City State ZIP Code	Disputed						
	Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.						
	Debtor 2 only	An agreement you made (such as mortgage or secured car loan)						
	Debiol 2 of liv	,						
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)						
	•	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)						

Debtor 1 Geoffrey Edward Hammond III Case number (if known)
First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Last 4 digits of account number 0001							
	Column A dollar value totals from all pages.	\$ 781586.14					

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

Part 2:	List Others to Be Notified for a Debt That You Already Listed
agency is you have	ge only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection rying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if nore than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to for any debts in Part 1, do not fill out or submit this page.
	On which line in Part 1 did you enter the creditor?

notined for any	y debts in Part 1, do not fill out t	or submit this j	page.	
Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
Number	Street			
City		State	ZIP Code	

Fill in this information to identify your case:						
Debtor 1	Geoffrey	Edward	Hammond	III		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)						
	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of Oregon						
Case number (If known)						

Official Form 106E/F

# Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part	1: List All of Your PRIORITY Unsec	cured Claims			
1. Do	any creditors have priority unsecured claim No. Go to Part 2. Yes.	ns against you?			
ea no un	ch claim listed, identify what type of claim it is. npriority amounts. As much as possible, list the secured claims, fill out the Continuation Page o	creditor has more than one priority unsecured claim, list If a claim has both priority and nonpriority amounts, list is claims in alphabetical order according to the creditor's of Part 1. If more than one creditor holds a particular class instructions for this form in the instruction booklet.)	that claim here name. If you h	and show bot ave more than	h priority and two priority
			Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$	\$	\$
	Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated			
	City State ZIP Code  Who incurred the debt? Check one.	Disputed  Type of PRIORITY unsecured claim:			
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			
	Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?  No  Yes				

### Part 2: List ALL of Your NONPRIORITY Unsecured Claims

3. D	o any creditors have nonprio	rity unsecured	d claims against	you?	
	No. You have nothing to repo	rt in this part. S	Submit this form t	to the court with your other schedules.	
n ir	onpriority unsecured claim, list t	he creditor sep ne creditor hold	arately for each	ical order of the creditor who holds each claim. If a creditor has r claim. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three nonparts.	st claims already
					Total claim
4.1	American Express Nonpriority Creditor's Name			Last 4 digits of account number 2007	\$ 17238.40
	PO BOX 3001 16 GENERAL	WARREN BL	VD	When was the debt incurred? 4/27/2023	
	MALVERN City	PA State	19355 ZIP Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check Debtor 1 only	one.		Contingent Unliquidated Disputed	
	Debtor 2 only  Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes			Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Card	
4.2	CITICARDS			Last 4 digits of account number 6108	\$ 9175.27
	Nonpriority Creditor's Name PO BOX 6004 Number Street			When was the debt incurred? 05/05/2023	
	SIOUX FALLS City	SD State	57117 ZIP Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check	one.		Contingent Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors a	nd another		Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for Is the claim subject to offset?	a community d	lebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	No Yes			Other. Specify  CREDIT CARD	
4.3	CHASE CARDMEMBER SE	RVICES		Last 4 digits of account number 4221	\$ 8290.92
	PO BOX 6294 Number Street			When was the debt incurred? 4/16/2023	
	CAROL STREAM	IL State	60197 ZIP Code	As of the date you file, the claim is: Check all that apply	
	Ony	State	ZIF CODE		

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

#### Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

#### After listing any entries on this page, number them beginning with 4.., followed by 4.5, and so forth.

**Total claim** 

Who incurred the debt? Check one.

Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No Yes Contingent
Unliquidated
Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce

that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify
CREDIT CARD

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

P	List Others to Be Notified About a Debt That You Already Listed							
5.	example 2, then l	ist the collection agency here. Similarly, if you	you for a chave more	debt you owe to some than one creditor for	that you already listed in Parts 1 or 2. For eone else, list the original creditor in Parts 1 or any of the debts that you listed in Parts 1 or 2, list the lebts in Parts 1 or 2, do not fill out or submit this page.			
	Name		On whic	ch entry in Part 1 or F	Part 2 did you list the original creditor?			
	Name		Line	of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims			
	Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims			
		20.4	Last 4 c	ligits of account num				
	City	State ZIP Code						

6j. Total. Add lines 6f through 6i.

Middle Name

34704.59

34704.59

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$	
	6b.	Taxes and certain other debts you owe the government	6b.	\$	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	\$	
				Total claim	
Total claims from Part 2	6f.	Student loans	6f.	\$ 0.00	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 34704.59	

6j.

First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
	First Name	First Name Middle Name	

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have t	he contra	ct or lease	State what the contract or lease is for
Name			_
Number Street			_
City	State	ZIP Code	_

Debtor 1	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: District of Ore	egon	

# Official Form 106H

# **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Check all sch	
Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property state or territory? (Community property state or territory?) (Community property state or territory?) (Community property state or territory.) (Community property state or territory.) (Community state or territory.) (Community state or territory.) (Community state or territory.) (Community.) (Co	
2. Within the last 8 years, have you lived in a community property state or territory? (Community property state or territory did you live?	
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wis No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No  Yes. In which community state or territory did you live?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State ZIP Code  In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No  Yes. In which community state or territory did you live?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State ZIP Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure your schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule Sche	
No Yes. In which community state or territory did you live?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State ZIP Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule Sc	
Yes. In which community state or territory did you live?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State ZIP Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule Sched	
Name of your spouse, former spouse, or legal equivalent    Number   Street	
Number Street  City State ZIP Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule Sch	ne and current address of that person.
City State ZIP Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The Check all schedule	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure your schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.    Column 1: Your codebtor   Column 2: The Check all schedule Schedule E/F (Official Form 106E/F)   Column 2: The Check all schedule E/F (Official F	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure your schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.    Column 1: Your codebtor   Column 2: The Check all schedule Schedule E/F (Official Form 106E/F)   Column 2: The Check all schedule E/F (Official F	
shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure yo Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form Schedule E/F, or Schedule G to fill out Column 2.    Column 1: Your codebtor   Column 2: The Check all schedule Schedule C to fill out Column 2: The Check all schedule C to fill out Column 3: Schedule C to fill out Column 3: The Check all schedule C to fill out C t	
Check all sch	u have listed the creditor on
Name Schedu	
Name	e creditor to whom you owe the debt
	e creditor to whom you owe the debt edules that apply:
	•
Number Street Schedu	edules that apply:
	edules that apply:
City State ZIP Code	le D, line

Fill in this	information to ic	dentify your case:			
Debtor 1	Geoffrey	Edward	Hammond	III	
	First Name	Middle Name	Last Name		Check if this is:
Debtor 2 (Spouse, if filing	ng)				An amended filing
	First Name	Middle Name	Last Name		A supplement showing postpetition
United State	es Bankruptcy Court	for the: District of Ore	egon		income as of the following date:
Case number	er 				MM / DD / YYYY

n chapter 13

Official Form 106I

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: **Describe Employment** 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, attach a separate page with **Employment Status Employed** Employed information about additional Not employed Not employed employers. Include part-time, seasonal, or self-employed work. Occupation may Include student or homemaker, if it applies Occupation Employer's name **Employer's address** Number Street Number Street City State Zip Code City State Zip Code How long employed there?

Middle Name First Name Last Name

#### **Give Details About Monthly Income** Part 2:

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines

	If you or your non-filing spouse have more than one employer, combine the inbelow. If you need more space, attach a separate sheet to this form.	forma	ition for all employe	rs for that person on the lines
			For Debtor 1	For Debtor 2 or non-filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	\$
3.	Estimate and list monthly overtime pay.	3.	+ \$	+ \$
4.	Calculate gross income. Add line 2 + line 3.	4.	\$	\$
	Copy line 4 here	4.	\$	\$
5.	List all payroll deductions:			
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$
	5b. Mandatory contributions for retirement plans	5b.	\$	\$
	5c. Voluntary contributions for retirement plans	5c.	\$	\$
	5d. Required repayments of retirement fund loans	5d.	\$	\$
	5e. Insurance	5e.	\$	\$
	5f. Domestic support obligations	5f.	\$	\$
	5g. Union dues	5g.	\$	\$
	5h. Other deductions. Specify:	5h.	+ \$	+ \$
		5h.	+ \$	+ \$
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$
8.	List all other income regularly received:			
	8a. Net income from rental property and from operating business, profession, or farm			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$
	8b. Interest and dividends	8b.	\$0.00	\$
	8c. Family support payment that you, a non-filing spouse, or a dependent regularly receive			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$
	8d. Unemployment compensation	8d.	\$0.00	\$
Ì				

First Name

Middle Name

					F	or Debtor	1		For Debtor 2 non-filing spe				
	8e.	Social Security		8e.	\$	0	.00		\$				
	8f.	Other governm	ent assistance that you regularly receive										
		assistance that	sistance and the value (if known) of any non-c you receive, such as food stamps (benefits ur utrition Assistance Program) or housing subsi	nder the									
		Specify:		8f.	\$	O	.00		\$				
				8f.	\$				\$				
	8g.	Pension or reti	rement income	8g.	\$	0	.00		\$				
	8h.	Other monthly	income. Specify:	8h.	+\$	0	.00		+ \$				
				8h.	+\$				+ \$				
9.	Add	all other incom	<b>e.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g	+ 8h. 9.	\$	C	.00		\$				
10.		•	ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp	ouse. 10.	\$	C	.00	+[	\$		=	\$	0.00
11.	Stat	e all other regul	ar contributions to the expenses that you I	ist in <i>Schedule</i> J	J.								
		ıde contributions ds or relatives.	from an unmarried partner, members of your	household, your	depei	ndents, y	our ro	omr	mates, and of	ther			
	Do r	not include any a	mounts already included in lines 2-10 or amou	ints that are not a	availa	ble to pa	у ехре	nse	es listed in <i>Sc</i>	chedui	le J.		
	Spe	cify:							-	11.	+	\$	0.00
12.			he last column of line 10 to the amount in I the Summary of Your Assets and Liabilities a							12.		\$Combined monthly inco	0.00 ome
13.	Doy	ou expect an ir	crease or decrease within the year after yo	ou file this form?	?								
		No.											
		Yes. Explain:											

Fill in this in	formation to id	entify your case:			
Debtor 1	Geoffrey	Edward	Hammond	III	Check if this is:
	First Name	Middle Name	Last Name		An amended filing
Debtor 2 (Spouse, if filing)					A supplement showing postpetition chapter 13
( ) ( )	First Name	Middle Name	Last Name		income as of the following date:
United States I	Bankruptcy Court	for the: District of Ore	gon		
Case number (If known)			_		MM / DD / YYYY

0	fficial Form 106J					
S	chedule J: Your	Expenses				12/15
inf	as complete and accurate as possib ormation. If more space is needed, at known). Answer every question.					
P	art 1: Describe Your Househ	oold				
1.	Is this a joint case?					
	No. Go to line 2.					
	Yes. Does Debtor 2 live in a sep	parate household?				
	No					
	Yes. Debtor 2 must file (	Official Form 106J-2, Expenses for	Separate Household of Debtor	2.		
2.	Do you have dependents?	No	Dependent's relationship to Debtor 1 or Debtor 2	Depende age	ent's	Does dependent live with you?
	Do not list Debtor 1 and Debtor 2.	and Yes. Fill out this information for each dependent				No Yes
	Do not state the dependents' names.					No
						Yes
						No Yes
						No
						Yes
						No
						Yes
3.	Do your expenses include	No				
	expenses of people other than yourself and your dependents?	Yes				
P	art 2: Estimate Your Ongoing	g Monthly Expenses				
ex	timate your expenses as of your bank penses as of a date after the bankrup plicable date.					
	clude expenses paid for with non-cas ch assistance and have included it o				You	ur expenses
4.	The rental or home ownership expeany rent for the ground or lot.	enses for your residence. Include	first mortgage payments and	4.	\$	7500.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	0.00
	4b. Property, homeowner's, or renter	's insurance		4b.	\$	0.00

First Name Middle Name Last Name

			Your expens	ses
	4c. Home maintenance, repair, and upkeep expenses	4c.	\$	1000.00
	4d. Homeowner's association or condominium dues	4d.	\$	0.00
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	650.00
	6b. Water, sewer, garbage collection	6b.	\$	250.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d. Other Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	1000.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	250.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11.	\$	0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15b.	_	
	15c. Vehicle insurance	15c.	\$	
	15d. Other. Specify:	15d.	\$	
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	464.71
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	
	17d. Other. Specify:	17d.		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> , Your Income (Official Form 106I).	18.	\$	
19.	Other payments you make to support others who do not live with you.			

Debtor 1 Geoffrey Edward Hammond III Case number (if known)

First Name Middle Name Last Name

			Your expenses
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$
21.	Other. Specify:	21.	+\$
22.	Calculate your monthly expenses.		
	22a. Add lines 4 through 21.	22a.	\$ 11514.71
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$ 11514.71
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$
	23b. Copy your monthly expenses from line 22c above.	23b.	<b>-</b> \$11514.71
	23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c.	\$0.00
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?		
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		

Fill in this information to identify your case:										
Debtor 1	Geoffrey	Edward	Hammond	III						
	First Name	Middle Name	Last Name							
Debtor 2 (Spouse, if filing)										
	First Name	Middle Name	Last Name							
United States Bankruptcy Court for the: District of Oregon										
Case number (If known)										

Check if this is an amended filing

## Official Form 122A—1Supp

### Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

#### Part 1: Identify the Kind of Debts You Have

- 1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).
  - No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

#### Part 2: Determine Whether Military Service Provisions Apply to You

2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. Are you or have you been a Reservist or member of the National Guard?

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

Fill in this information to identify your case:											
Debtor 1	Geoffrey	Edward	Hammond	III							
	First Name	Middle Name	Last Name								
Debtor 2 (Spouse, if filing)											
	First Name	Middle Name	Last Name								
United States	Bankruptcy Court for the	District of Oregon	1								
Case number (If known)											

Check if this is an amended filing

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Re as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

What is your cur	rent marital s	status?				
Married						
Not married						
During the last 3	years, have	you lived anyw	here other than where y	ou live now?		
No						
Yes. List all o	of the places y	ou lived in the la	st 3 years. Do not include	where you live now.		
Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor	1	Same as Debtor 1
			From			From
Number Str	eet		То	Number Stree	et	То
						_
City	State	ZIP Code		City	State ZIP Code	_
				Same as Debtor	1	Same as Debtor 1
			From			From
Number Str	eet		То	Number Stree	et	То
						_
City	State	ZIP Code		City	State ZIP Code	_

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

Part 2:	Explain	the	Sources	of '	Your	Income

4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years?
	Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
	If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	Source of Income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating Business	\$	Wages, commissions, bonuses, tips Operating Business	\$
For last calendar year: (January 1 to December 31,)	Wages, commissions, bonuses, tips Operating Business	\$	Wages, commissions, bonuses, tips Operating Business	\$
For last calendar year before that: (January 1 to December 31,)	Wages, commissions, bonuses, tips Operating Business	\$	Wages, commissions, bonuses, tips Operating Business	\$

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until		\$		\$
the date you filed for bankruptcy:		\$		\$
		\$		\$
For last calendar year:		\$		\$
(January 1 to December 31,		\$		\$
YYYY		\$		\$
For the calendar year before that:		\$		\$
(January 1 to December 31,)		\$		\$
YYYY		\$		\$

First Name Middle Name Last Name

#### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

#### 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

#### Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

			Dates of payment	Total amou	ınt paid	Amount you	u still owe	Was this payment for
American Express			04/27/2023	\$	2043.00	\$	17238.40	Mortgage
Creditor's Name						•		Car
PO BOX 60189								Credit Card
Number Street			-					Loan Repayment
								Suppliers or vendors
CITY OF INDUSTRY	CA	91716						Other
City	State	ZIP Code	_					
			Dates of payment	Total amou	ınt paid	Amount you	u still owe	Was this payment for
CHASE CARDMEMB	ER SE	RVICES	02/07/2023	\$	1866.13	\$	8290.92	Mortgage
Creditor's Name								Car
PO BOX 15298								Credit Card
Number Street			-					Loan Repayment
								Suppliers or vendors
WILMINGTON	DE	15298	=					Other
City	State	ZIP Code	_					
			Dates of payment	Total amou	ınt paid	Amount you	u still owe	Was this payment for
CITICARDS			02/15/2023	\$	3654.47	\$	9702.33	Mortgage
Creditor's Name								Car
PO BOX 6004			_					Credit Card
Number Street			=					Loan Repayment

<sup>\*</sup> Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

								Cumpliare or yandara
								Suppliers or vendors Other
		SIOUX FALLS	SD	57117	_			
		City	State	ZIP Code				
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		Mercedes Benz Fina	ancial Se	ervices	05/05/2023	\$ 464.71	\$ 24586.14	Mortgage
		Creditor's Name						Car
		PO BOX 5209 Number Street			_			Credit Card
		Number Street						Loan Repayment Suppliers or vendors
					-			Other
		CAROL STREAM	IL	60197	_			
		City	State	ZIP Code				
	No.	support and alimony t all payments to an ins	ider.		Dates of	Total amount	Amount you still owe	Reason for this payment
					payment	paid		
	Insider's	Name				\$	\$	
					-			
	Number	Street						
	-				-			
	City		State	ZIP Code	=			
8.	an insider? Include paym No.	nr before you filed for ments on debts guarant t all payments that ben	eed or c	osigned by an		nts or transfer any pro	perty on account of a	debt that benefited
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
						¢	\$	
	Insider's	Name				\$	Φ	
	Number	Street			-			
					-			
	City		State	ZIP Code	_			

Case number (if known)

Debtor 1 Geoffrey

First Name

Edward

Middle Name

Hammond

Debtor 1	Geoffrey	Edward	Hammond		III	Case number (if know	vn)
	First Name	Middle Name	Last Name			_	
Part 4	ldentify l	egal Actions, Repo	ssessions, and F	oreclosures			
List		, including personal inju			uit, court action, or adn es, collection suits, paterr		
ano	No						
	Yes. Fill in the	dotoilo					
	res. Fill in the t	details.					
			Nature of the case		Court or agency		Status of the case
	Case title				]		Pending
			_		Court Name		On appeal
							Concluded
	Case number		_		Number Street		-
							-
					City	State ZIP Code	
					Oity	Clate Zii Codo	
	Yes. Fill in the I	nformation below.	Descri	be the property		Date	Value of the property
	Creditor's 1	Name					\$
	Orealior 3 i	vairie	Evolai	n what happened			
	Number	Street		ii wiiat iiappeiieu			
			Pr	operty was repo	ssessed.		
				operty was fored			
	0::	0		operty was garn			
	City	State Z	IP Code Pr	operty was attac	ched, seized, or levied.		
acc	ounts or refuse	e to make a payment be	uptcy, did any credi ecause you owed a	itor, including a debt?	bank or financial institu	ution, set off any aff	iounts from your
	No		•				
	Yes. Fill in the	dotoilo					
	res. Fill III the t	details.					
			Describe the	e action the credit	or took	Date action was taken	Amount
						was taken	
							\$
	Creditor's Name						
	Number Stree	Ţ					

City

State ZIP Code

Last 4 digits of account number: XXXX–

Yes			
List Certain Gifts and Contributi	ons		
in 2 years hefers you filed for heady water	u did von sino onu sifto with a total value	o of more than \$500 per person?	
nin 2 years before you filed for bankrupto No	y, did you give any girts with a total valu	e of more than \$000 per person?	
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	• Value
Person to Whom You Gave the Gift	_		_ \$
Number Street	_		
City State ZIP Code	 		
Person's relationship to you			
No		s with a total value of more than	\$600 to any char
No	ution.	s with a total value of more than	\$600 to any char
nin 2 years before you filed for bankrupton No Yes. Fill in the details for each gift or contributions to charities that total more than \$600		Date you contributed	\$600 to any char
No Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600	ution.	Date you	
No Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600  Charity's Name	ution.	Date you	Value
No Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600  Charity's Name	ution.	Date you	Value
Yes. Fill in the details for each gift or contrib  Gifts or contributions to charities that total more than \$600  Charity's Name  Number Street	ution.	Date you	Value

Case number (if known)

Debtor 1 Geoffrey

First Name

Edward

Middle Name

Hammond

Debtor 1	Geoffrey	Edward	Hammond	Ш	Case number (if known)
	First Name	Middle Name	Last Name		

	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	STOCK MARKET CRASH	NA	12/31/2022	\$240000.00
Part 7	List Certain Payments or Transfer	s		
you	consulted about seeking bankruptcy or pre	d you or anyone else acting on your behalf pay or trans paring a bankruptcy petition? s, or credit counseling agencies for services required in you		to anyone
	No	,		
	Yes. Fill in the details.			
		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				\$
	Person Who Was Paid			
	Number Street			
	City State ZIP Code			
	Email or website address			
	Person Who Made the Payment, if Not You			
pro	hin 1 year before you filed for bankruptcy, di mised to help you deal with your creditors o not include any payment or transfer that you list No Yes. Fill in the details.		sfer any property	to anyone who
		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				\$
	Person Who Was Paid			·
	Number Street			
	City State ZIP Code			
	•			

10	ithin 2 years before you filed for bankruptcy, ansferred in the ordinary course of your busin clude both outright transfers and transfers made to not include gifts and transfers that you have alr	ness or financial affairs? as security (such as the granting or				erty
	No					
	Yes. Fill in the details.					
		Description and value of property transferred		property or payments bts paid in exchange		ate transfe vas made
	Person Who Received Transfer	-			-	
	Number Street	-				
	City State ZIP Code	-				
	Person's relationship to you					
	ithin 10 years before you filed for bankruptcy e a beneficiary? (These are often called asset-page No  Yes. Fill in the details.			t or similar device of		∂ate transfe
	e a beneficiary? (These are often called asset-p	protection devices.)		t or similar device of		
	e a beneficiary? (These are often called asset-p	protection devices.)		t or similar device of		∂ate transfe
re Iden	e a beneficiary? (These are often called asset-page 1) No Yes. Fill in the details.	Description and value of the property of the p	erty transferred  oxes, and Storage struments held in y	ge Units rour name, or for you	r benefit	Date transfe vas made
r lo	No Yes. Fill in the details.  Name of trust  List Certain Financial Accounts, I ithin 1 year before you filed for bankruptcy, wosed, sold, moved, or transferred? clude checking, savings, money market, or or other parts.	Description and value of the property of the p	erty transferred  oxes, and Storage struments held in y	ge Units rour name, or for you	r benefit	Date transfe vas made
re Iden	Re a beneficiary? (These are often called asset-particles asse	Description and value of the property of the p	erty transferred  oxes, and Storage struments held in y	ge Units rour name, or for you	r benefit	Date transfe vas made
re Iden	No Yes. Fill in the details.  Name of trust  List Certain Financial Accounts, I ithin 1 year before you filed for bankruptcy, wosed, sold, moved, or transferred? clude checking, savings, money market, or or okerage houses, pension funds, cooperatives.	Description and value of the property of the p	erty transferred  oxes, and Storage struments held in y	ge Units rour name, or for you	r benefit	Date transfe vas made
r lo	No Yes. Fill in the details.  Name of trust  List Certain Financial Accounts, I ithin 1 year before you filed for bankruptcy, wosed, sold, moved, or transferred? clude checking, savings, money market, or or okerage houses, pension funds, cooperatives. No Yes. Fill in the details.  Charles Schwab & Co.	Description and value of the proposit Barrements, Safe Deposit Barrements accounts or instruments, associations, and other finance	erty transferred  oxes, and Storage struments held in yules of deposit; sharial institutions.	ge Units  Your name, or for your res in banks, credit units  Date account was closed, sold, moved,	r benefit	Date transfe vas made , , , lance befor or transfer
t Vi	No Yes. Fill in the details.  Name of trust  List Certain Financial Accounts, lithin 1 year before you filed for bankruptcy, wosed, sold, moved, or transferred? clude checking, savings, money market, or or okerage houses, pension funds, cooperatives. No Yes. Fill in the details.	Description and value of the proposit Barruments, Safe Deposit Barrere any financial accounts or insther financial accounts; certificats, associations, and other finance	erty transferred  oxes, and Storage struments held in y tes of deposit; shar ial institutions.  Type of account or instrument  Checking Savings	ge Units  Four name, or for your es in banks, credit units  Date account was closed, sold, moved, or transferred	r benefit, nions,	Date transfe vas made , , , lance befor or transfer
rt Clo	No Yes. Fill in the details.  Name of trust  List Certain Financial Accounts, I ithin 1 year before you filed for bankruptcy, wosed, sold, moved, or transferred? clude checking, savings, money market, or or okerage houses, pension funds, cooperatives. No Yes. Fill in the details.  Charles Schwab & Co.	Description and value of the proposit Barruments, Safe Deposit Barrere any financial accounts or insther financial accounts; certificats, associations, and other finance	erty transferred  oxes, and Storage struments held in y tes of deposit; shar ial institutions.  Type of account or instrument  Checking	ge Units  Four name, or for your es in banks, credit units  Date account was closed, sold, moved, or transferred	r benefit, nions,	Date transfei vas made

Case number (if known)

Debtor 1 Geoffrey

First Name

Edward

Middle Name

Hammond

San Francisco	CA	94105				
City	State	ZIP Code	_			
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Firstrade Name of Financial Ins	titution		XXXX- <u>0471</u>	Checking Savings	03/13/2023	\$
30-50 Whitestone E	Expwy A30	1	_	Money market		
Number Street				Brokerage		
			_	Other		
Flushing	NY	11354				
City	State	ZIP Code	_			

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution	Name		No Yes
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		No Yes
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

Part 9: Identify Property You Hold or Control for Someone Else

	you hold or control hold in trust for som		eone else owns? Inclu	de any property you b	orrowed from, are storing fo	or,
	No					
	Yes. Fill in the detail	ls.				
			Where is the propert	y?	Describe the property	Value
						\$
	Owner's Name					
	Number Street		Number Street		_	
	Number Street		Number Street			
					—	
	City	State ZIP Code	City	State ZIP Code	_	
	•		•			
Part	10: Give Details	About Environmenta	al Information			
ut ■ <i>H</i> a	lize it or used to own	n, facility, or property as , operate, or utilize it, ii	s defined under any er ncluding disposal site mental law defines as	s. a hazardous waste, h	material. ther you now own, operate, azardous substance, toxic	, or
ut Ha su Repo	lize it or used to own  zardous material mean bstance, hazardous r  rt all notices, releases  as any governmental	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal sites mental law defines as taminant, or similar ten t you know about, reg	nvironmental law, whe s. a hazardous waste, h m. ardless of when they	ether you now own, operate,	
ut Ha su Repo	lize it or used to own  nzardous material mean  bstance, hazardous r  rt all notices, releases  as any governmental	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal sites mental law defines as taminant, or similar ten t you know about, reg	nvironmental law, whe s. a hazardous waste, h m. ardless of when they	ether you now own, operate, azardous substance, toxic occurred.	
ut Ha su Repo	lize it or used to own  zardous material mean bstance, hazardous r  rt all notices, releases  as any governmental	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal sites mental law defines as taminant, or similar ten t you know about, reg	avironmental law, when s.  a hazardous waste, hom.  ardless of when they wasted the second the seco	ether you now own, operate, azardous substance, toxic occurred.	mental law?
ut Ha su Repo	lize it or used to own  zardous material mean bstance, hazardous r  rt all notices, releases  as any governmental	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, rega ou may be liable or po	avironmental law, when s.  a hazardous waste, hom.  ardless of when they wasted the second the seco	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
ut Ha su Repo	lize it or used to own uzardous material mean bstance, hazardous r rt all notices, releases us any governmental No Yes. Fill in the detail	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, rega ou may be liable or po	avironmental law, when s.  a hazardous waste, hom.  ardless of when they wasted the second the seco	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
ut ■ <i>Ha</i> su Repo	lize it or used to own uzardous material mean bstance, hazardous r rt all notices, releases us any governmental No Yes. Fill in the detail	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal site: mental law defines as taminant, or similar telet tyou know about, regulated ou may be liable or po  Governmental unit	avironmental law, when s.  a hazardous waste, hom.  ardless of when they wasted the second the seco	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
ut Ha su Repo	lize it or used to own uzardous material mean bstance, hazardous r rt all notices, releases us any governmental No Yes. Fill in the detail	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, confirst, and proceedings that unit notified you that you	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, regulated to the control of t	avironmental law, when s.  a hazardous waste, hom.  ardless of when they wasted the second the seco	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
utt ⊪ Ha su Repo	lize it or used to own szardous material mean bstance, hazardous r rt all notices, releases as any governmental No Yes. Fill in the detail  Name of site  Number Street	n, facility, or property and property and properate, or utilize it, in the sanything an environ material, pollutant, context, and proceedings that unit notified you that your series.	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, regulated to the control of t	a hazardous waste, hom.  ardless of when they detentially liable under of the standard standa	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
utt ⊪ Ha su Repo	Itize it or used to own Itizardous material mean Ibstance, hazardous r It all notices, releases	n, facility, or property and property and proceedings that unit notified you that your state.  State ZIP Code	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, regulated to the control of t	a hazardous waste, hom.  ardless of when they detentially liable under of the standard standa	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?
utt ■ Ha su Repo	lize it or used to own nzardous material mean bstance, hazardous r rt all notices, releases as any governmental No Yes. Fill in the detail  Name of site  Number Street  City  ave you notified any g	n, facility, or property and property and proceedings that unit notified you that your state.  State ZIP Code	s defined under any er ncluding disposal site: mental law defines as taminant, or similar ter t you know about, regulated to the control of t	a hazardous waste, hom.  ardless of when they detentially liable under of the standard standa	ether you now own, operate, azardous substance, toxic occurred. or in violation of an environ	mental law?

Case number (if known)

Debtor 1 Geoffrey

First Name

Edward

Middle Name

Hammond

First Name Middle Name	Last Name		
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIF	P Code City State ZIP	Code	
Have you been a party in any judicia	l or administrative proceeding under a	ny environmental law? Include settle	ments and orders.
No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
Case title			Pending
	Court Name		On appe
Case number			Conclud
	Number Street		
	City State ZIP	Code	
	Oity State Zii	Code	
rt 11: Give Details About Your	Business or Connections to Any I	Business	
Within 4 years before you filed for ba	nkruptcy, did you own a business or h	ave any of the following connections	to any business?
A sole proprietor or self-emp	ployed in a trade, profession, or other	activity, either full-time or part-time	
A member of a limited liabili	ty company (LLC) or limited liability pa	artnership (LLP)	
A partner in a partnership			
	ging executive of a corporation		
	ne voting or equity securities of a corp	poration	
All owner of at least 3/8 of the	ie voting of equity securities of a corp	oration	
No. None of the above applies. 0	o to Part 12.		
Yes. Check all that apply above	and fill in the details below for each bu	usiness.	
roor oncorrain mar appry above			
	Describe the nature of the bu		
		Do not include s	Social Security number or ITII
Aequantium LLC	REGISTERED COMMODIT		100
Business Name	OPERATOR	<b>EIN</b> : 84-4590	100
111 SW 5TH 3150			
Number Street	Name of accountant or book	keeper Dates business	existed
	CITRIN COOPERMAN	From 02/05/2	020 <b>To</b> 05/08/2023
	204	32/00/2	
City State ZIF	P Code		
	Describe the nature of the bu		fication number
		Do not include 5	Social Security number or ITI

Case number (if known)

Debtor 1 Geoffrey

Edward

Hammond

Aequantium Rese Business Name	arch LLC	EXEMPT COMMODITY TRADING ADVISOR	<b>EIN</b> : 84-4569244
111 SW 5TH 3150	)		
Number Street		Name of accountant or bookkeeper	Dates business existed
PORTLAND	OR 9720	CITRIN COOPERMAN	From 02/05/2020 To 05/08/2023
City	State ZIP C	de	
		Describe the nature of the business	Employer Identification number Do not include Social Security number or
Aeguantium Volat	ility Arbitrage Fund	.P MANAGED FUTURES FUND	
Business Name	, ,		<b>EIN</b> : 84-4617468
111 SW 5TH 3150 Number Street	)		
Number Street		Name of accountant or bookkeeper	Dates business existed
		CITRIN COOPERMAN	From 02/05/2020 To 05/08/2023
PORTLAND	OR 9720		10 05/06/2023
	01.1 710.0		
tutions, creditors No Yes. Fill in the deta	ails below.	uptcy, did you give a financial statement to anyone ab	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU Name	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO	uptcy, did you give a financial statement to anyone ab	out your business? Include all financial
in 2 years before tutions, creditors. No Yes. Fill in the deta	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO	Date issued 03/31/2023	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU Name  300 S. RIVERSID	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO	Date issued 03/31/2023	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU Name  300 S. RIVERSID Number Street	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO	Date issued  03/31/2023  MM / DD / YYYY	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU Name  300 S. RIVERSID Number Street  CHICAGO  City	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO  E 1800  IL 6060	Date issued  03/31/2023  MM / DD / YYYY	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU Name  300 S. RIVERSID Number Street  CHICAGO	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO  E 1800  IL 6060	Date issued  03/31/2023  MM / DD / YYYY	out your business? Include all financial
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU  Name  300 S. RIVERSID  Number Street  CHICAGO  City  2: Sign Below  ave read the answ swers are true and connection with a	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO  E 1800  IL 6060  State ZIP Corrects on this Statend correct. I unders	Date issued  03/31/2023  MM / DD / YYYY	clare under penalty of perjury that the ty, or obtaining money or property by fr
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU  Name  300 S. RIVERSID  Number Street  CHICAGO  City  2: Sign Below  ever ead the answewers are true and connection with a U.S.C. §§ 152, 134	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO  E 1800  IL 6060  State ZIP Correct. I unders bankruptcy case 11, 1519, and 3571	Date issued    03/31/2023   MM / DD / YYYY	clare under penalty of perjury that the ty, or obtaining money or property by fr up to 20 years, or both.
in 2 years before tutions, creditors.  No Yes. Fill in the deta  NATIONAL FUTU  Name  300 S. RIVERSID  Number Street  CHICAGO  City  2: Sign Below  ever ead the answewers are true and connection with a U.S.C. §§ 152, 134	you filed for bank, or other parties.  ails below.  RES ASSOCIATIO  IL 6060  State ZIP Correct. I unders bankruptcy case	Date issued  O3/31/2023  MM / DD / YYYY   deent of Financial Affairs and any attachments, and I deend that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for	clare under penalty of perjury that the ty, or obtaining money or property by fr up to 20 years, or both.

Case number (if known)

Debtor 1 Geoffrey

First Name

Edward

Middle Name

Hammond

ou attach addi	tional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
'es	

Case number (if known)

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Debtor 1 Geoffrey

First Name

Yes. Name of Person

Edward

Middle Name

Hammond

Debtor 1	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court			

Check if this is an amended filing

### Official Form 108

## **Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

۱.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.				
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
	Creditor's BSI FINANCIAL name:	Surrender the property.  Retain the property and redeem it.	No Yes		
	Description of 3362 SW FAIRMOUNT BLVD SINGLE FAMILY property RESIDENCE	Retain the property and enter into a Reaffirmation Agreement.			
	securing debt:	Retain the property and [explain]:			
	Creditor's Mercedes Benz Financial	Surrender the property.	No		
	name:	Retain the property and redeem it.	Yes		
	Description of MERCEDES GLA250 property	Retain the property and enter into a Reaffirmation Agreement.			
	securing debt:	Retain the property and [explain]:			

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	

Debtor 1	Geoffrey	Edward	Hammond	III	Case number (if known)
	First Name	Middle Name	Last Name		

Describe your unexpired personal property leases	Will the lease be assumed?
Description of leased property:	No Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Χ		<b>X</b>
	Signature of Debtor 1	Signature of Debtor 2
	Date 05/08/2023	Date
	MM / DD / YYYY	MM / DD / YYYY

Debtor 1	Geoffrey	Edward	Hammond	III
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: District of Ore	gon	

# **Mailing List**

List contains the name and address of each entity included on Schedules D, E/F, G, H and Creditor Information.

BSI FINANCIAL		
PO BOX 517		
TITUSVILLE	PA	16354
Mercedes Benz Financial		
PO BOX 5209		
Carol Stream	IL	60197
American Express		
PO BOX 3001 16 GENERAL WARREN BLVD		
MALVERN	PA	19355
CITICARDS		
PO BOX 6004		
SIOUX FALLS	SD	57117
CHASE CARDMEMBER SERVICES		
PO BOX 6294		
CAROL STREAM	IL	60197